

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2003 8:00 am
Secretary of State

09-12-2003 90096 034 ****70.00

DOCUMENT # 714371

1. Entity Name
SARASOTA BABE RUTH LEAGUE, INC.



Principal Place of Business

**401 POMPANO
SARASOTA FL 34230
US**

Mailing Address

**POST OFFICE BOX 3835
SARASOTA FL 34230**

2. Principal Place of Business

401 POMPANO

Suite, Apt. #, etc.

3. Mailing Address

Post Office Box

Suite, Apt. #, etc.

3735



☐ CHECK HERE IF MAKING CHANGES

City & State
SARASOTA, FLORIDA

City & State
SARASOTA, FLORIDA

4. FEI Number **59-2336343**

Applied For

Not Applicable

Zip
34230

Country

Zip
34230

Country

5. Certificate of Status Desired **#**

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SNYDER, SALLY
2811 E FOREST LAKE DR
SARASOTA FL 34232**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **VD** ☐ Delete
NAME **HARDEE, STEVE**
STREET ADDRESS **2806 12 ST**
CITY-ST-ZIP **SARASOTA FL 34237**

TITLE **PD** ☐ Delete
NAME **SNYDER, SALLY**
STREET ADDRESS **2811 EAST FOREST LAKE DRIVE**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **TD** ☐ Delete
NAME **LUCAS, THOMAS**
STREET ADDRESS **2571 GREEN OAK CT**
CITY-ST-ZIP **SARASOTA FL 34232**

TITLE **S** ☐ Delete
NAME **STUTZMAN, WAYNE**
STREET ADDRESS **1100 RHODES AVE**
CITY-ST-ZIP **SARASOTA FL 34237**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☐ Change ☐ Addition
NAME **STEVE HARDEE**
STREET ADDRESS **1304 NORTH COURAD**
CITY-ST-ZIP **SARASOTA, FLORIDA 34237**

TITLE **PD** ☐ Change ☐ Addition
NAME **SALLY SNYDER**
STREET ADDRESS **2811 E. FOREST LAKE DRIVE**
CITY-ST-ZIP **SARASOTA, FLORIDA 34232**

TITLE **TD** ☐ Change ☐ Addition
NAME **KEITH TROUTMAN**
STREET ADDRESS **1839 SOUTH ORANGE AVE**
CITY-ST-ZIP **SARASOTA, FLORIDA 34239**

TITLE **S** ☐ Change ☐ Addition
NAME **CARL LUCE**
STREET ADDRESS **3245 OLD OAK DRIVE**
CITY-ST-ZIP **SARASOTA, FLORIDA 34239**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Sally Snyder 945-924-8970

CR2E037 (4/03)