

FILED  
Jun 11, 2003 8:00 am  
Secretary of State

06-11-2003 90060 017 \*\*\*\*61.25

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

DOCUMENT # 719833

1. Entity Name

CREW BOOSTERS OF WINTER PARK, INC.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
P.O. Box 1003

3. Mailing Address  
P.O. Box 1003

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Winter Park, FL

City & State  
Winter Park, FL

4. FEI Number  
23-7090778

Applied For  
Not Applicable

Zip Country  
32790 USA

Zip Country  
32790 USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
Dewey Ramsby

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

601 Langholm Drive

City Winter Park FL Zip Code 32789

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

5/21/03

FEE IS \$61.25  
Initial or Amended UBR

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 P/D  
NAME Harry Collison  
STREET ADDRESS Ste 3, 180 S. Knowles Ave.  
CITY-ST-ZIP Winter Park, FL 32789

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP/D  
NAME Jonathan Rich  
STREET ADDRESS 1010 Bonita Drive  
CITY-ST-ZIP Winter Park, FL 32789

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S/D - Recording  
NAME Lisa Snider  
STREET ADDRESS 2526 Anaconda Trail  
CITY-ST-ZIP Maitland, FL 32751

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S/D - Corresponding  
NAME Julie Sooley  
STREET ADDRESS 2320 Forrest Road  
CITY-ST-ZIP Winter Park, FL 32789

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VP/D  
NAME Dewey Ramsby  
STREET ADDRESS 601 Langholm Drive  
CITY-ST-ZIP Winter Park, FL 32789

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address with all other like empowered.

SIGNATURE:

Signature and typed or printed name of signing officer or director

Vice President

5/21/03

Date

(407) 425-8500

Daytime Phone #

CR2E037B (12/02)