2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # 719888

FILED
May 11, 2000 8:00 am
Secretary of State
03-28-2000 90042 026 ****61.25

1. Entity Name

SEMINOLE JUNIOR WARHAWKS ATHLETIC ASSOCIATION, I

Principal Place of Business	Mailing Address
11500-125TH ST. N. LARGO FL 33774 US	P. O. BOX 7332 SEMINOLE FL 33775-7332 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 51-0188572 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KING, F K 13119 CIMARRON CIRCLE S LARGO FL 33774 OLIVIER CERF 9330 EAST BAY SEMINOLE FL. 33776	Name Cerf, Olivier Street Address (P.O. Box Number is Not Acceptable) PO Box 7332 City Seminole, Fl 33775-7332 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.

SIGNATURE _____ 3/5/00
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	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NUNES, PETER 9740 122ND WY NO SEMINOLE FL 33772	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Cerf Olivier PO Box 7332 Seminole, Fl 33775-7332	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PATRICK, GINGER 3928 15TH AVE SE LARGO FL 33771	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD BURNS, PAUL 10173 WEST BAY ST SEMINOLE FL 33776	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD Roberts, Tim PO Box 7332 Seminole, Fl 33775-7332	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WALTERICK, SUE 14528 110 TH TERR N LARGO FL 33774	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HOCHSPRUNG, ANNE ~~PO~~ PO Box 7332 Seminole, Fl 33775-7332	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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 3/5/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #