

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

AMENDED

FILED

DOCUMENT # 724277

1. Entity Name

FLORIDA YOUTH BASKETBALL, INC.

02 DEC 26 AM 11:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2941 Hickory Creek Drive

Suite, Apt. #, etc.

3. Mailing Address

2941 Hickory Creek Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Orlando, Florida

City & State
Orlando, FL

4. FEI Number
23-7242596

Applied For

Not Applicable

Zip
32818

Country
USA

Zip
32818

Country
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
Bill Smith

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

2941 Hickory Creek Drive

City
Orlando FL Zip 32818

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

C. William Smith

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Nov. 22, 2002

**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
Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
President
Bill Smith
2941 Hickory Creek Drive
Orlando, FL 32818

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Vice President
Anthony Gonzalez
1400 Gaston Foster Road
Orlando, FL 32812

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
Sec/Treas.
Cindy Fussell
2413 S. Summerlin Avenue
Orlando, FL 32806

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
District Commissioner
Kelly Callihan
5th Street
Haines City, FL

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
District Commissioner
Ron Osborne
1121 Lucerne Avenue
Lake Worth, FL 33460

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
District Commissioner
Rhondy Weston
649 W. Livingston Avenue
Orlando, FL

TITLE
NAME
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**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

Nov. 22, 2002

Date

Daytime Phone

407.812.3598

CR2E037B (12/01)

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