

2000 UNIFORM BUSINESS REPORT (UBR)

8/8/

FILED

Aug 21, 2000 8:00 am
Secretary of State

08-08-2000 90091 020 ****61.25

DOCUMENT # 731689

1. Entity Name

TOWN & COUNTRY PONY BASEBALL, INC.

(2)

Principal Place of Business

7001 BASEBALL AVE
PO BOX 260626
TAMPA FL 33685

Mailing Address

7001 BASEBALL AVE
PO BOX 260626
TAMPA FL 33685

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

06-1849003

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BERNARDI, DANNA K
881-BOYSENBERRY DR
TAMPA FL 33635

-Delete-

Name

Randy Helms

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

PO Box 260626 7001 Baseball Ave
PO Box 260626

City

TAMPA

FL

Zip Code
33685

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 13, 2000 min. will be \$236.25

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	PD	<input checked="" type="checkbox"/> Delete
NAME	SCIME, MARK	
STREET ADDRESS	7301 BASEBALL AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	HARLEY, MICHAEL	
STREET ADDRESS	7301 BASEBALL AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	BERNARDI, DANNA K	
STREET ADDRESS	7301 BASEBALL AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	MELCHER, DENISE	
STREET ADDRESS	7301 BASEBALL AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WEGMAN, RICHARD	
STREET ADDRESS	1301 BASEBALL AVE	
CITY-ST-ZIP	TAMPA FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Randy Helms	
STREET ADDRESS	7301 Baseball Ave	
CITY-ST-ZIP	TAMPA FL 33635	
TITLE	Vice President / winter	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ed Smit	
STREET ADDRESS	7301 Baseball Ave	
CITY-ST-ZIP	Tampa FL 33635	
TITLE	Summer / Vice-President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Mark Scime	
STREET ADDRESS	7301 Baseball Ave	
CITY-ST-ZIP	Tampa FL 33635	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	George Bussey	
STREET ADDRESS	7301 Baseball Ave	
CITY-ST-ZIP	TAMPA FL 33635	
TITLE	Jody Strain Equipment Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jody Strain	
STREET ADDRESS	7301 Baseball Ave	
CITY-ST-ZIP	Tampa FL 33635	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2037 (5/00)

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/00

Date

Daytime Phone #