

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2002 8:00 am
Secretary of State

04-17-2002 90090 008 ****61.25

DOCUMENT # 732265

1. Entity Name

BIG RED QUARTERBACK CLUB, INC.

Principal Place of Business

Mailing Address

NORTH FORT MYERS HIGH SCHOOL
 5000 ORANGE GROVE BLVD.
 N. FT. MYERS FL 33903

NORTH FORT MYERS HIGH SCHOOL
 5000 ORANGE GROVE BLVD.
 N. FT. MYERS FL 33903

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

59-1702092

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

MILLER, HAROLD V.
 17911 LEETANA RD.
 N FT MYERS FL 33917

7. Name and Address of New Registered Agent

Name **Ballard, Danny G.**

Street Address (P.O. Box Number is Not Acceptable)
9521 Littleton Rd

City **N. Ft Myers**

FL **33903**

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 **Danny G. Ballard**

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

(NOTE: Registered Agent signature required when reinstating)

Danny G. Ballard

Feb 10 2002

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

TITLE	P	☒ Delete
NAME	TAUNTON, ROBERT	
STREET ADDRESS	5716 GALLOWAY DR	
CITY-ST-ZIP	N. FORT MYERS FL 33903	
TITLE	P	☒ Delete
NAME	BALLARD, DANNY	
STREET ADDRESS	9521 LITTLETON RD	
CITY-ST-ZIP	N. FORT MYERS FL 33903	
TITLE	S	☒ Delete
NAME	SHULZE, BARBARA	
STREET ADDRESS	507 NW 15TH AVE	
CITY-ST-ZIP	CAPE CORAL FL 33909	
TITLE	TD	☒ Delete
NAME	WEINSTOCK, JULIE	
STREET ADDRESS	1397 LINCOLN AVENUE	
CITY-ST-ZIP	NORTH FT MYERS FL	
TITLE	D	☐ Delete
NAME	BALLARD, DEBRA	
STREET ADDRESS	9521 LITTLETON RD	
CITY-ST-ZIP	N. FORT MYERS FL 33903	
TITLE	D	☒ Delete
NAME	WISE, PAUL	
STREET ADDRESS	39 NE 13TH AVE	
CITY-ST-ZIP	CAPE CORAL FL 33909	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Sec.	☐ Change ☒ Addition
NAME	Colleen Becroft	
STREET ADDRESS	1838 SE 1st St	
CITY-ST-ZIP	Cape Coral FL 33990	
TITLE	Treas.	☐ Change ☒ Addition
NAME	Lisa Spires	
STREET ADDRESS	8160 Penny Dr.	
CITY-ST-ZIP	N Ft. Myers FL 33917	
TITLE	VP	☐ Change ☒ Addition
NAME	Patsy Spasato	
STREET ADDRESS	1804 SW 2nd Pl	
CITY-ST-ZIP	Cape Coral, FL 33991	
TITLE	Pres	☒ Change ☐ Addition
NAME	Danny Ballard	
STREET ADDRESS	9521 Littleton Rd	
CITY-ST-ZIP	N. Ft Myers, FL 33903	
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: **Danny Ballard** **DANNY BALLARD** **Danny Ballard** **2-10-2002**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)

941-997-

0961