

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 734262

1. Entity Name

GREATER JACKSONVILLE POP WARNER FOOTBALL CONFERE

FILED
Jan 28, 2000 8:00 am
Secretary of State

01-28-2000 90130 014 ****61.25

Principal Place of Business

Mailing Address

851 N. MARKET ST.
 JACKSONVILLE FL 32202-2742

851 N. MARKET ST.
 JACKSONVILLE FL 32202-2742



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2943927

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KELLY, JOHN W.
851 N. MARKET ST.
JACKSONVILLE FL 32202

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

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	Change	Addition
VP	SUBER, JIM	12846 WANDA LANE	JACKSONVILLE FL	<input type="checkbox"/>	<input type="checkbox"/>
S	ANDERSON, DON	14045 LALUNA CIRCLE NORTH	JACKSONVILLE FL	<input type="checkbox"/>	<input type="checkbox"/>
TD	TATUM, MICHAEL J.	11510 HOBART BV	JACKSONVILLE FL	<input type="checkbox"/>	<input type="checkbox"/>
PD	CONNORS, DENNIS	6847 TANGO LN. N.	JACKSONVILLE FL	<input type="checkbox"/>	<input type="checkbox"/>
D	KELLY, JOHN W.	851 N. MARKET ST.	JACKSONVILLE FL	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Michael J. Tatum 1-25-00 (904) 630-1447
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)