

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751636

1. Entity Name

EAST POINT LITTLE LEAGUE OF MANGO, INC.

Principal Place of Business

P.O. BOX 127
MANGO FL 33550

Mailing Address

P.O. BOX 127
MANGO FL 33550

2. Principal Place of Business

Same as above

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 52-1225450

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FARRAR, DENNIS
1310 RUSTLEWOOD DR
BRANDON FL 33510

7. Name and Address of New Registered Agent

Name Ray Price

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

5000 Pine Street

City

Seffner

FL

Zip Code

33584

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
After September 12, 2001, 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

TITLE PD ☒ Delete

NAME AVERY, PHYLLIS

STREET ADDRESS PO BOX 132

CITY-ST-ZIP MANAO FL 33550

TITLE VD ☒ Delete

NAME SPANO, STACEY

STREET ADDRESS PO BOX 6701

CITY-ST-ZIP SEFFNER FL 33583

TITLE TD ☒ Delete

NAME FARRAR, DENNIS

STREET ADDRESS 1310 RUSTLEWOOD DR

CITY-ST-ZIP BRANDON FL 33510

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition

NAME Ray Price

STREET ADDRESS 5000 Pine Street

CITY-ST-ZIP Seffner, FL 33584

TITLE VD ☒ Change ☐ Addition

NAME David Johnson

STREET ADDRESS 10908 Lee Street

CITY-ST-ZIP Tampa, FL 33610

TITLE TD ☒ Change ☒ Addition

NAME Tammie Swain

STREET ADDRESS 4804 E. Pocahontas Ave.

CITY-ST-ZIP Tampa, FL 33610

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:

SIGNATURE REQUIRED

Ray Price (313-601-4364)

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90004 004 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (5/01)