

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

0086437

DOCUMENT # 757493

1. Entity Name

EUSTIS LITTLE LEAGUE, INC.

03-06-2002 90034 029 ****61.25

| | |
|---|---|
| Principal Place of Business GOLFLINKS AND KURT STREET P.O. BOX 1100 EUSTIS FL 32727-8100 | Mailing Address GOLFLINKS AND KURT STREET P.O. BOX 1100 EUSTIS FL 32727-8100 |
|---|---|

506972



DO NOT WRITE IN THIS SPACE

| | |
|---|---|
| 2. Principal Place of Business Suite, Apt. #, etc. | 3. Mailing Address Suite, Apt. #, etc. |
|---|---|

| | | | |
|--------------|--------------|------------------------------------|-------------------------------|
| City & State | City & State | 4. FEI Number 59-2114379 | Applied For Not Applicable |
| Zip | Country | Zip | Country |

| | |
|---|---------------------------------------|
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
|---|---------------------------------------|

6. Name and Address of Current Registered Agent

WEISS, DAVID L
2310 S. BAY ST.
EUSTIS FL 32726

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| | | | |
|---------------------------------|--|------------------------------------|--|
| FILE NOW: FEE IS \$61.25 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | \$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 | VPD TOMLINSON, HARRY 36956 LAKE YALE DR. GRAND ISLAND FL 32726 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P CLEMENTS, KATHY 142 TIMBER LN EUSTIS FL 32726 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TD WEISS, DAVID L 3700 PROGRESS BLVD MOUNT DORA FL 32757 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | SD DOUGLAS, SHERRIE 36135-APIARY RD GRAND ISLAND FL 32735 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <i>See Attachment</i> | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Jennifer Bowers-SD 34828 Marshall Road Eustis, FL 32736 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: *David L. Weiss* **SIGNATURE REQUIRED** **2-19-02** **352-483-1100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)

Attachment

#757493/582972

| | | | |
|---|----------|---|----------|
| Boles, Hugh P.O. Box 223 Mt. Dora, FL 32756 | Director | Meeks, Teri 20545 North Road Altoona, FL 32702 | Director |
| Brown, Angela 36422 Glenwood Circle Eustis, FL 32736 | Director | Merrill, Kent P.O. Box 687 Umatilla, FL 32784 | Director |
| Burgess, Mike 36 E. Dice Ave. Eustis, FL 32736 | Director | Platt, Leon 418 S. Grove St. Eustis, FL 32726 | Director |
| Clayton, Tony 2645 Waterview Drive Eustis, FL 32726 | Director | Royal, Richard P.O. Box 168 Umatilla, FL 32784 | Director |
| Clayton, Terri 2645 Waterview Drive Eustis, FL 32726 | Director | Shreiner, Debbie 41906 N. Emerald Island Rd. Leesburg, FL 34788 | Director |
| Ganus, Mike 1805 W. Bay Rd. Mt. Dora, FL 32757 | Director | Shreiner, Dion 41906 N. Emerald Island Rd. Leesburg, FL 34788 | Director |
| Gibson, Jim P.O. Box 789 Altoona, FL 32702 | Director | Stone, Susan 19000 Willis McCall Rd. Eustis, FL 32726 | Director |
| Johnson, Lori 36101 Huff Road Eustis, FL 32736 | Director | Wishneski, Tina 1205 St. Andrews Eustis, FL 32726 | Director |
| Lucroy, Karen P.O. Box 687 Umatilla, FL 32784 | Director | | |