

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2003 8:00 am
Secretary of State

01-23-2003 90076 001 ****61.25

DOCUMENT # 757752

1. Entity Name

CORAL SPRINGS NATIONAL LITTLE LEAGUE, INC.



Principal Place of Business

**8393 NW 5TH STREET
CORAL SPRINGS FL 33071**

Mailing Address

**8393 NW 5TH STREET
CORAL SPRINGS FL 33071**

2. Principal Place of Business

11377 NW 21 COURT

3. Mailing Address

11377 NW 21 COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CORAL SPRINGS FL

City & State

CORAL SPRINGS FL

4. FEI Number **59-2196306**

Applied For

Not Applicable

Zip

33071

Country

USA

Zip

33071

Country

USA

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

CONKLIN, SUSAN

8393 NW 5TH STREET

CORAL SPRINGS FL 33071

7. Name and Address of New Registered Agent

Name

MICHAEL SAVASTA

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

11377 NW 21 COURT

City

CORAL SPRINGS

FL

Zip Code

33071

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-14-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	VPD	<input type="checkbox"/> Delete
NAME	RUSSO, JOSEPH	
STREET ADDRESS	5570-A LAKEWOOD CIRCLE	
CITY-ST-ZIP	MARCATE FL 33063	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CODY, JANET	
STREET ADDRESS	4230 CORAL SPRINGS DR	
CITY-ST-ZIP	CORAL SPRINGS FL 33065	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FRENCH, DEBBIE	
STREET ADDRESS	RAMBLEWOOD DRIVE	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	PD	<input type="checkbox"/> Delete
NAME	CONKLIN, SUSAN	
STREET ADDRESS	8393 N.W. 5TH ST.	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAY FEINBERG	
STREET ADDRESS	10047 NW 2nd St	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDREW CUTLER	
STREET ADDRESS	166 SW 84th Way	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHERYL KLEINERT	
STREET ADDRESS	1591 NW 102nd Way	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 RECD MICHAEL SAVASTA

1-14-03

CR2E037 (10/02)