

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

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90358 049 *****61.25

DOCUMENT # 762102

1. Entity Name
RAM FOOTBALL CLUB, INC.



Principal Place of Business

**ONE RAM WAY
SARASOTA FL 34231**

Mailing Address

**ONE RAM WAY
SARASOTA FL 34231**

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 **59-2191420**

Applied For

Not Applicable

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

**SPRAGUE, JOHN C
7328 PALOMINO LANE
SARASOTA FL 34241**

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. 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

4/16/03

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Delete
NAME **BRACKETT, MICHELE T**
STREET ADDRESS **7867 SADDLE CREEK TRAIL**
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE **PD** ☒ Change ☐ Addition
NAME **Penny Gray**
STREET ADDRESS **4548 Satinleaf Ln.**
CITY-ST-ZIP **SARASOTA, FL 34241**

TITLE **STD** ☐ Delete
NAME **ELLIS, SUE**
STREET ADDRESS **5101 FAR OAK CIRCLE**
CITY-ST-ZIP **SARASOTA FL 34238**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **SPRAGUE, JOHN C**
STREET ADDRESS **7328 PALOMINO LANE**
CITY-ST-ZIP **SARASOTA FL 34241**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☒ Delete
NAME **BOTTORFF, CHERYL A.**
STREET ADDRESS **4667 FALCON RIDGE DR**
CITY-ST-ZIP **SARASOTA, FL 00000**

TITLE **Sec** ☒ Change ☐ Addition
NAME **Christine Dooley**
STREET ADDRESS **2237 McIntosh Rd.**
CITY-ST-ZIP **Sarasota, FL 34232**

TITLE **D** ☐ Delete
NAME **SPRAGUE, JOHN C.**
STREET ADDRESS **3985 HELENE ST**
CITY-ST-ZIP **SARASOTA, FL 00000**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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:

Penny Gray **4/16/03** **941-929-7620**

CR2E037 (10/02)