

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

**FILED**  
**Feb 20, 2003 8:00 am**  
**Secretary of State**

02-20-2003 90136 009 \*\*\*\*61.25

**DOCUMENT # 764772**

1. Entity Name

**CORAL SPRINGS TACKLE FOOTBALL CLUB, INC.**



Principal Place of Business

**1666 NORTHWEST 111 WAY  
CORAL SPRINGS FL 33071  
US**

Mailing Address

**1666 NORTHWEST 111 WAY  
CORAL SPRINGS FL 33071  
US**

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 **59-2252761**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**GRUSHKA, DONN  
1666 NW 111 WAY  
CORAL SPRINGS FL 33071**

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. 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

**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 **DICKENS, HARRY**  
STREET ADDRESS **6711 YELLOWSTONE LANE**  
CITY-ST-ZIP **POMPAÑO BEACH FL 33067**

TITLE ☒ Change ☐ Addition  
NAME **6711 YELLOWSTONE LANE**  
STREET ADDRESS **PARKLAND, FL. 33067**  
CITY-ST-ZIP

TITLE **TD** ☐ Delete  
NAME **GRUSHKA, DONN**  
STREET ADDRESS **1666 NW 111 WAY**  
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

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

TITLE **SD** ☒ Delete  
NAME **TALBOT, DEBBIE**  
STREET ADDRESS **11251 NW 10TH MANOR**  
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **SD** ☐ Change ☒ Addition  
NAME **JANICE TUZZIO**  
STREET ADDRESS **4940 NW 92ND TERRACE**  
CITY-ST-ZIP **CORAL SPRINGS, FL 33067**

TITLE **RD** ☐ Delete  
NAME **GRUSHKA, DONN**  
STREET ADDRESS **1666 NW 111 WAY**  
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

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

TITLE **VPD** ☐ Delete  
NAME **MCCABE, MICHAEL**  
STREET ADDRESS **10811 CYPRESS GLEN**  
CITY-ST-ZIP **CORAL SPRINGS FL 33071**

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:

**Donn Grushka, TD** 2/13/03 954-267-1069

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

CR2E037 (10/02)