

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2001 08:00 AM
Secretary of State

DOCUMENT # 767001

1. Entity Name
 PINELLAS YOUTH FOOTBALL CONFERENCE, INC.

Principal Place of Business P.O. BOX 71 LARGO FL 34649	Mailing Address P.O. BOX 71 LARGO FL 34649
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2. Principal Place of Business P.O. BOX 71	3. Mailing Address P.O. BOX 71
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State LARGO FL	City & State LARGO FL
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Zip 33779	Country	Zip 33779	Country
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4. FEI Number 59-2317385	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LEWIS GAYLE
 1145 66TH AVE SOUTH

 SAINT PETERSBURG FL 33705

7. Name and Address of New Registered Agent

Name
 WATERS GENEVA
 Street Address (P.O. Box Number is Not Acceptable)
 12001 BELCHER ROAD #N224

 City
 LARGO FL Zip Code
 33773

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 GENEVA WATERS DATE 05/24/2001
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
 Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP FELTON TYRONE 4134 13TH AVE S ST PETERSBURG FL 33711 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WATERS GENEVA 12001 BLECHER RD., N224 LARGO FL 33773 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LEWIS GAYLE 1145 66TH AVE SOUTH SAINT PETERSBURG FL 33705 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BULLARD FRAN 3917 5TH AVE SOUTH ST PETERSBURG FL 33771 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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 PD WATERS GENEVA 12001 BELCHER RD., N224 LARGO FL 33773 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition VD BULLARD FRAN P. O. BOX 13344 ST PETERSBURG FL 33733 <input checked="" 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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: GENEVA WATERS PD 05/24/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #

CR2E037 (11/00)