

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90450 029 *****70.00

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DOCUMENT # 767228

1. Entity Name

PALM BAY YOUTH SOCCER INCORPORATED

Principal Place of Business

**714 GERNILLIH AVE SW
 PALM BAY FL 32908
 US**

Mailing Address

**P.O. BOX 60929
 PALM BAY FL 32906-0929
 US**

5 5 0 0 2 2

2. Principal Place of Business

714 Geranium Ave SW

3. Mailing Address

Suite, Apt. #, etc.

City & State

Palm Bay, FL

City & State

Zip

32908

Country

US

Country

4. FEI Number

59-2420411

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**VANMEIR, KATHLEEN S
 3935 PEPPERTREE STREET
 GRANT FL 32949**

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

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 ☐ Delete
 NAME **P**
 STREET ADDRESS **HINCHMAN, JAMES A**
 CITY-ST-ZIP **714 GERANIUM AVENUE S.W.
 PALM BAY FL 32908**

TITLE ☐ Delete
 NAME **V**
 STREET ADDRESS **SHELDON, GREGORY J**
 CITY-ST-ZIP **565 JUSTINE AVENUE N.W.
 PALM BAY FL 32907**

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **VANMEIR, KATHLEEN S**
 CITY-ST-ZIP **3935 PEPPERTREE STREET
 GRANT FL 32949**

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **RYAN, CHRIS**
 CITY-ST-ZIP **1401 HAYWORTH CIRCLE N.W.
 PALM BAY FL 32907**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **WALDEN, TOM**
 CITY-ST-ZIP **1213 JADE LANE NE
 PALM BAY FL 32907**

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **SCHMID, PETE**
 CITY-ST-ZIP **1375 TILBERG AVE NW
 PALM BAY FL 32907**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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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: [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-01 (321) 723-5206

Date Daytime Phone #

CR2E037 (10/00)