

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 768846

1. Entity Name

FORT MYERS-LEE COUNTY YOUTH BASKETBALL ASSOCIATI

FILED
Jan 29, 2001 8:00 am
Secretary of State

01-29-2001 90104 028 ****61.25

Principal Place of Business

2121 WEST FIRST STREET
FT. MYERS FL 33901

Mailing Address

P.O. DRAWER 400
FT MYERS FL 33902

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

59-2326257

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEWART, JOHN
2121 WEST FIRST STREET
FT. MYERS FL 33901

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME STEWART, JOHN
STREET ADDRESS 2121 WEST FIRST STREET
CITY-ST-ZIP FT. MYERS FL 33901

TITLE DST ☐ Change ☒ Addition
NAME STEVEN R. WHITLEY
STREET ADDRESS 15783 SILVERADO COURT SW
CITY-ST-ZIP FT. MYERS, FL 33908

TITLE D/VP ☐ Delete
NAME BENNETT, DAVID
STREET ADDRESS 8814 FORDHAM AVE.
CITY-ST-ZIP FT. MYERS FL 33907

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

TITLE DST ☒ Delete
NAME SHIPLEY, GERALD
STREET ADDRESS 13732 PINE VILLA LANE
CITY-ST-ZIP FT. MYERS FL 33912

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

John F. Stewart
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-15-01 941-334-1141

CR2E037 (10/00)