2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#768846

FILED Sep 09, 2003 Secretary of State

Entity Name: FORT MYERS-LEE COUNTY YOUTH BASKETBALL ASSOCIATION, INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
2121 WEST FIRST STREET FT. MYERS, FL 33901			9675 SPRING RIDGE CIRCLE ESTERO, FL 33928			
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. DRAWER 400 FT MYERS, FL 33902				9675 SPRING RIDGE CIRCLE ESTERO, FL 33928		
FEI Number:	59-2326257	FEI Number Applied For () FEI N	umber Not App	licable () Certificate of Status D	esired ()	
Name and	Address of C	current Registered Agent:	Name and	Address of New Registered Age	ent:	
STEWART, JOHN 2121 WEST FIRST STREET FT. MYERS, FL 33901 US			DONMOYER, JAMES 9675 SPRING RIDGE CIR ESTERO, FL 33928 US			
	named entity s of Florida.	submits this statement for the purpose	of changing i	its registered office or registered ac	gent, or both,	
SIGNATURE: JAMES DONMOYER				09/09/2003		
	Electron	ic Signature of Registered Agent		Date		
OFFICERS	AND DIREC	TORS:	ADDITION	IS/CHANGES TO OFFICERS ANI	DIRECTORS:	
Title: Name: Address: City-St-Zip: Title:	STEWART, JOH 2121 WEST FIF FT. MYERS, FL	RST STREET	Title: Name: Address: City-St-Zip: Title:	PD (X) Change () Addition DONMOYER, JAMES 9675 SPRING RIDGE CIRCLE ESTERO, FL 33928 () Change () Addition		
Name: Address: City-St-Zip:	BENNETT, DAV 8814 FORDHAN FT. MYERS, FL	M AVE.	Name: Address: City-St-Zip:			
Title: Name: Address: City-St-Zip:	WHITLEY, STE	ADO COURT SW	Title: Name: Address:	()Change ()Addition		
		FL 33908	City-St-Zip:			

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES DONMOYER PD 09/09/2003