

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91277 036 \*\*\*150.00

0647934 AT

**DOCUMENT # F01000005448**

1. Entity Name

ALL STAR BLEACHERS, INC.



Principal Place of Business  
6550 NEW TAMPA HIGHWAY  
LAKELAND FL 33815-3148

Mailing Address  
8223 BRECKSVILLE ROAD  
SUITE 100  
BRECKSVILLE OH 44141-1361

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

59-3742191

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

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 \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution.

☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DCEO ☐ Delete  
NAME HEFFERNAN, ROBERT  
STREET ADDRESS 99 BROWER AVENUE  
CITY-ST-ZIP OAKS PA 19456

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

TITLE VD ☐ Delete  
NAME BONIELLO, MICHAEL P  
STREET ADDRESS 99 BROWER AVENUE  
CITY-ST-ZIP OAKS PA 19456

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

TITLE VD ☐ Delete  
NAME MARSH, TODD  
STREET ADDRESS 6550 NEW TAMPA HIGHWAY  
CITY-ST-ZIP LAKELAND FL 33815-3148

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

TITLE PD ☐ Delete  
NAME MARSH, DONALD  
STREET ADDRESS 6550 NEW TAMPA HIGHWAY  
CITY-ST-ZIP LAKELAND FL 33815-3148

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

TITLE ST ☐ Delete  
NAME CURCI, JOHN V  
STREET ADDRESS 6950 SOUTH EDGERTON ROAD  
CITY-ST-ZIP BRECKSVILLE OH 44141-3184

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Change ☒ Addition  
NAME Bosi, Robert A.  
STREET ADDRESS 8223 Brecksville Road, #100  
CITY-ST-ZIP Brecksville, OH 44141-1361

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 607, 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.

Robert A. Bosi

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer

4-22-03

440-838-4700

Date

Daytime Phone #

CR2E034 (10/02)