

2001 UNIFORM BUSINESS REPORT (UBR)

4/

FILED
May 25, 2001 8:00 am
Secretary of State

04-23-2001 90126 015 ****61.25

DOCUMENT # F95000005027

1. Entity Name

EAST COAST HOCKEY LEAGUE, INC.

Principal Place of Business

Mailing Address

103 MAIN ST. SUITE 300
 PRINCETON NJ 08540

103 MAIN ST. SUITE 300
 PRINCETON NJ 08540

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

54-1472984

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

FELIX, CHARLES
 201 E GREGORY STREET - REAR
 C/O PENSACOLA ICE PILOTS
 PENSACOLA FL 32501

Name

Neil Hoyt

Street Address (P.O. Box Number is Not Acceptable)

201 EAST GREGORY STREET - REAR

C/O PENSACOLA ICE PILOTS

City

PENSACOLA

FL

Zip Code

32501

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

Neil Hoyt

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restate.)

DATE

5/15/01

**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 NAME STREET ADDRESS CITY-ST-ZIP	PD ADAMS, RICHARD 125 VILLAGE BLVD STE 210 PRINCETON NJ	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SABATINO, SCOTT 125 VILLAGE BLVD STE 210 PRINCETON NJ	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PRICE, DOUG 125 VILLAGE BLVD STE 210 PRINCETON NJ	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELIX, CHARLES 201 E GREGORY ST - REAR PENSACOLA FL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAGIN, ROY C 1250 ROYDRAKS ST, SUITE 1050 NEW ORLEANS LA 70130	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD EDWARDS, JAMES 1201 NORWOOD ST. JOHNSTOWN PA 15904	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	103 MAIN STREET, SUITE 300 PRINCETON, NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	103 MAIN STREET, SUITE 300 PRINCETON, NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	103 MAIN STREET, SUITE 300 PRINCETON, NJ 08540	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEBB GREENWALD 2507 51 ST STREET HYATTSVILLE, MD 20781	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RAY C. NAGIN 1250 ROYDRAKS ST., SUITE 1050 NEW ORLEANS, LA 70130	<input checked="" 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)(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 OF REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01

DATE

609452 0770

DAYTIME PHONE #

CR2E037 (10/00)