

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90268 039 *****61.25

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1. Entity Name

NORTH CENTRAL FLORIDA UMPIRES ASSOCIATION, INC.



Principal Place of Business

**23292 N.W. 199TH LANE
HIGH SPRINGS FL 32643
US**

Mailing Address

**P.O. BOX 2154
HIGH SPRINGS FL 32655-2154**



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

59-3618800

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SPIEGEL & UTREHA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

7. Name and Address of New Registered Agent

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 \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SCOTT, MEL
23292 N.W. 199TH LANE
HIGH SPRINGS FL 32643 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BUCKNER, BENJAMIN A.
23292 NW 199TH LANE
HIGH SPRINGS FL 32643 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BUCKNER, PAUL A
23292 N.W. 199TH LANE
HIGH SPRINGS FL 32643 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
LEE, MARTIN
23292 NW 199TH LANE
HIGH SPRINGS FL 32643 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
HODGES, BOBBY T
23292 N.W. 199TH LANE
HIGH SPRINGS FL 32643 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BENJAMIN A. BUCKNER
23292 N.W. 199TH LANE
HIGH SPRINGS, FL 32643 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
RAYMOND F. PARHAM
23292 N.W. 199TH LANE
HIGH SPRINGS, FL 32643 ☒ Change ☐ Addition

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *BEN BUCKNER* BEN BUCKNER

April 29, 2006 (352) 258-4465