## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N00000000721

Entity Name: POINCIANA LITTLE LEAGUE INC.

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FISHER, ROBERT CU/D

KISSIMMEE, FL 34758

WHITEHAIR, ERIKA T/D

KISSIMMEE, FL 34759

LEWIS, JEFFREY VP/D

KISSIMMEE, FL 34758

HARRIS, DEBORAH L S/D

116 SAFFRON WAY

KISSIMMEE, FL 34758

1033 CANNOCK

1403 SWAN CT

411 SPICE CT

VP/D

P/D

S/D

Name:

Title:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Name: Address:

City-St-Zip:

Address: City-St-Zip: FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

411 SPICE CT 1033 CANNOCK KISSIMMEE, FL 34758 KISSIMMEE, FL 34758

Current Mailing Address: New Mailing Address:

411 SPICE CT 1033 CANNOCK KISSIMMEE, FL 34758 KISSIMMEE, FL 34758

FEI Number: 59-3504457 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEWIS, JEFFREY

411 SPICE CT

KISSIMMEE, FL 32758 US

FISHER, ROBERT M

1033 CANNOCK

KISSIMMEE, FL 32758 US

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: ROBERT FISHER 04/29/2003

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO C

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP/D (X) Change ( ) Addition

Name: SMITH, ADAM
Address: 821 CABARET CT
City-St-Zip: KISSIMMEE, FL 34758

Title: S/D (X) Change ( ) Addition

Name: HARRIS, DEBORAH L S/D Address: 116 SAFFRON WAY City-St-Zip: KISSIMMEE, FL 34758

Title: T/D (X) Change ( ) Addition

Name: HARRIS, DEBORAH T/D Address: 116 SAFFRON WAY City-St-Zip: KISSIMMEE, FL 34758

Title: IFO/ (X) Change ( ) Addition

Name: HARRIS, KRISTY L I/D Address: 1643 PERDIDO CT City-St-Zip: KISSIMMEE, FL 34759

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: DEBORAH HARRIS S/T 04/29/2003