

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 10, 2002 8:00 am**  
**Secretary of State**

01-16-2002 90264 001 \*\*\*\*61.25

**DOCUMENT # N00000004960**

1. Entity Name

**MISS BARTOW SOFTBALL, INC.**

Principal Place of Business

Mailing Address

3120 RIVER OAK DRIVE  
BARTOW FL 33831POST OFFICE BOX 1314  
BARTOW FL 33831-1314

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

59-3666320

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

LUNSFORD, LYNN  
3120 RIVER OAK DRIVE  
BARTOW FL 33831

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

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**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

TITLE ☐ DeleteNAME  
P LUNSFORD, LYNN  
STREET ADDRESS  
3120 RIVER OAK DR.  
CITY-ST-ZIP  
BARTOW FL 33830TITLE ☒ DeleteNAME  
VD MILLS, CURTIS  
STREET ADDRESS  
5019 MIMOSA AVE  
CITY-ST-ZIP  
BARTOW FL 33830TITLE ☒ DeleteNAME  
TD SPIREY, SHERRI  
STREET ADDRESS  
900 SOFT RD  
CITY-ST-ZIP  
BARTOW FL 33830TITLE ☐ DeleteNAME  
SD MILLS, JILL  
STREET ADDRESS  
509 MIMOSA AVE.  
CITY-ST-ZIP  
BARTOW FL 33830TITLE ☐ DeleteNAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ DeleteNAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ AdditionNAME  
Same  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☒ Change ☐ AdditionNAME  
Vice-President  
JEFF Ruiz  
STREET ADDRESS  
P.O. Box 2454  
CITY-ST-ZIP  
Bartow, FL. 33830TITLE ☒ Change ☐ AdditionNAME  
Treasurer  
Dana Wile  
STREET ADDRESS  
645 W. Pearl St.  
CITY-ST-ZIP  
Bartow, FL. 33830TITLE ☐ Change ☐ AdditionNAME  
Same  
STREET ADDRESS  
CITY-ST-ZIPTITLE ☐ Change ☒ AdditionNAME  
Dir. Annette Fussell  
STREET ADDRESS  
1799 King Rd  
CITY-ST-ZIP  
Bartow, FL. 33830TITLE ☐ Change ☒ AdditionNAME  
Dir. Loy Conner  
STREET ADDRESS  
695 S. Oak Ave  
CITY-ST-ZIP  
Bartow, FL. 33830

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02

Date

863-533-7731

Daytime Phone #

CR2E037 (9/01)