2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 02, 2003 8:00 am
Secretary of State
04-28-2003 91348 012 ****61.25

55045176

DOCUMENT # N00000006992

1. Entity Name
TOWN N COUNTRY LEAGUERETTS, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 260712 TAMPA FL 33685-0712	POST OFFICE BOX 260712 TAMPA FL 33685-0712

☐ CHECK HERE IF MAKING CHANGES

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 59-3685846 ☐ 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
GEORGE, LISA 8514 MANASSAS RD. TAMPA FL 33635	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GEORGE, LISA 8514 MANASSAS RD. TAMPA FL 33635	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SIERRA, CECILE 15202 BARBY AVE. TAMPA FL 33625	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President (V) Vickie Moss-Solomon VD 5006 Shetland Ave. Tampa, FL 33615	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GRAFF, KAREN 10002 OAKENGATE PL. TAMPA FL 33624	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary (S) Karen Graff SD 10002 Oakengate Pl. Tampa FL 33624	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TSD GOFF, KELLI 6309 SONGBIRD WAY TAMPA FL 33625	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer (T) TD Teresa Evans 10385 Carrollwood Ln #302 Tampa, FL 33618	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: Teresa Evans SECTeresa Evans, Treasurer 4/1/03 813-225-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #