

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000000430

FILED
Feb 18, 2003
Secretary of State

Entity Name: WINTER SPRINGS WARRIORS, INCORPORATED

Current Principal Place of Business:

987 SEQUICIA CT
WINTER SPRINGS, FL 32708

New Principal Place of Business:

987 SEQUOIA CT
WINTER SPRINGS, FL 32708

Current Mailing Address:

987 SEQUICIA CT
WINTER SPRINGS, FL 32708

New Mailing Address:

987 SEQUOIA CT
WINTER SPRINGS, FL 32708

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDLER, STU
987 SEQUICIA CT
WINTER SPRINGS, FL 32708

Name and Address of New Registered Agent:

EDLER, STU
987 SEQUOIA CT
WINTER SPRINGS, FL 32708

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: _____

Electronic Signature of Registered Agent

02/18/2003

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EDLER, STU
Address: 987 SEQUICIA CT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D () Delete
Name: FOX, CINDY
Address: 1580 S LYONS CT
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: BARCLAY, BERT
Address: 208 CHESTNUT RIDGE ST
City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EDLER, STU
Address: 987 SEQUOIA CT
City-St-Zip: WINTER SPRINGS, FL 32708

Title: D (X) Change () Addition
Name: RASINSKI, MICHAEL
Address: 930 CHOKECHERRY CT.
City-St-Zip: WINTER SPRINGS, FL 2708

Title: D (X) Change () Addition
Name: WEBER, ED
Address: 731 DIVINE CIR.
City-St-Zip: ORLANDO, FL 32828

Title: O () Change (X) Addition
Name: MCCOMB, WALTER
Address: 104 SPRINGCREEK LN.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: O () Change (X) Addition
Name: EDLER, DOREEN
Address: 987 SEQUOIA CT.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: O () Change (X) Addition
Name: FESSENDEN, PAUL
Address: 1215 TROTWOOD BLVD.
City-St-Zip: WINTER SPRINGS, FL 32708

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: DOREEN EDLER

Electronic Signature of Signing Officer or Director

O

02/18/2003

Date