2002 UNIFORM BUSINESS REPORT (UBR)

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FILED
Jul 14, 2002 8:00 am
Secretary of State
05-28-2002 91514 027 ****61.25

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DO NOT WRITE IN THIS SPACE

DOCUMENT # N01000002783

1. Entity Name

PEMBROKE PINES THUNDER OPTIMIST HOCKEY CLUB, INC

Principal Place of Business	Mailing Address
20772 NW 1ST CT. PEMBROKE PINES FL 33029	20772 NW 1ST CT. PEMBROKE PINES FL 33029

2. Principal Place of Business	3. Mailing Address
1700 N. Dykes Road	P.O. Box 822865
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Pembroke Pines, FL	City & State: S. Florida, Florida
Zip: 33028 Country: USA	Zip: 33029 Country: USA

4. FEI Number: 91-2147278 ☐ 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
KANTOR, PHILIP J ESQ. 200 SOUTH BISCAYNE BLVD., STE. ~~3180~~ 3400 MIAMI FL 33131-2367	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.

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 Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GEYSELEARS, JAN 20772 NW 1ST CT. PEMBROKE PINES FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVP KLOSENBERG, FRED 1110 SW. 103 AVE. PEMBROKE PINES FL 33029	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD TRAVIESO, DAN 9952 SW 16TH ST. PEMBROKE PINES FL 33026	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Leonard Mancinelli 18451 NW 9 St Pembroke Pines, FL 33029 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KANTOR, PHILIP J 200 S. BISCAYNE BLVD., ~~STE. 3160~~ MIAMI FL 33131-2367	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Suite 3400
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREGORIO, JIM 14910 NEWCASTLE LANE DAVIE FL 33331	☐ 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 (9/01)

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: SIGNATURE REQUIRED 4/30/02 305-960-2221

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #