

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02129

1. Entity Name

COVE SOCCER, INC.

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90731 049 ****70.00

Principal Place of Business

Mailing Address

318 S. MCARTHUR AVENUE
 PANAMA CITY FL 32401
 US

318 S. MCARTHUR AVENUE
 PANAMA CITY FL 32401
 US

00122801



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2399324

Applied For

Not Applicable

Zip

Country

Zip

Country

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

COOK, STEPHEN V
 318 S. MCARTHUR AVENUE
 PANAMA CITY FL 32401

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
 NAME COOK, STEPHEN V
 STREET ADDRESS 318 S. MCARTHUR AVENUE
 CITY-ST-ZIP PANAMA CITY FL 32401

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VPD ☐ Delete
 NAME MAYS, MITCHEL
 STREET ADDRESS 542 E 4TH ST
 CITY-ST-ZIP PANAMA CITY FL 32401

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD ☐ Delete
 NAME MOREAU, BARBARA
 STREET ADDRESS 6517 MINNEOLA STREET
 CITY-ST-ZIP PANAMA CITY FL 32404

TITLE SD ☒ Change ☐ Addition
 NAME MOREAU, BARBARA
 STREET ADDRESS 111 Seclusion Drive
 CITY-ST-ZIP Panama City Beach, FL 32413

TITLE TD ☐ Delete
 NAME MOREAU, BARBARA
 STREET ADDRESS 6517 MINNEOLA STREET
 CITY-ST-ZIP PANAMA CITY FL 32404

TITLE TD ☒ Change ☐ Addition
 NAME MOREAU, BARBARA
 STREET ADDRESS same as above
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

5/22/02 850-769-1682

CR2E037 (9/01)