

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

**FILED**  
**May 13, 2004 8:00 am**  
**Secretary of State**

05-13-2004 90007 048 \*\*\*\*61.25

DOCUMENT # *N03000007838*

1. Entity Name

Bay City Ballers, Inc.



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
2 North Tamiami Trail

Suite, Apt. #, etc.

3. Mailing Address  
2 North Tamiami Trail

Suite, Apt. #, etc.

City & State  
Sarasota, FL

City & State  
Sarasota, FL

4. FEI Number  
56-2419893

Applied For  
Not Applicable

Zip  
34236

Country  
USA

Zip  
34236

Country  
USA

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

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name  
Charles W. Telfair, IV

Street Address (P.O. Box Number is Not Acceptable)  
2 North Tamiami Trail

City  
Sarasota

FL

Zip Code  
34236

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

*Charles W. Telfair, IV*

Charles W. Telfair, IV  
Vice President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

*4/23/04*

DATE

**FEE IS \$61.25**  
**Initial or Amended UBR**

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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D John Jones 3045 Lockwood Meadows Blvd. Sarasota, FL 34234
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Charles W. Telfair, IV 550 Oakford Road Sarasota, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Vicki Doble 5594 Siesta Estates Court Sarasota, FL 34242
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Val Telfair 550 Oakford Road Sarasota, FL 34240
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Paul M. Connolly 4113 73rd Terrace Sarasota, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Marilyn Jones 3045 Lockwood Meadows Blvd. Sarasota, FL 34234

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Charles W. Telfair, IV*

Charles W. Telfair, IV  
Vice President

*4/23/04*

Date

(941) 951-1800

Daytime Phone #

CR2E037B (12/02)