

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N13220

1. Entity Name

INDIAN RIVER SOCCER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 650611
VERO BEACH FL 32965-7611

P.O. BOX 650611
VERO BEACH FL 32965-7611

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

NOT APPLICABLE

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

MARSHALL, VOYLES R JR
395 13TH AVE
VERO BCH FL 32962

Name

PAUL A. NEWMAN

Street Address (P.O. Box Number is Not Acceptable)

2926 PIPER DR.

City

VERO BEACH

FL

Zip Code

32960

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

PAUL A. NEWMAN, Treasurer

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

(NOTE: Registered Agent signature required when reinstating)

4/8/02

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
NAME FRITZ, MINER
STREET ADDRESS 595 NORTH TROPIC LANE APT C
CITY-ST-ZIP VERO BEACH FL 32960 ☒ Delete

TITLE PD
NAME POLK, Benjamin
STREET ADDRESS 515 GREYTHWA RD.
CITY-ST-ZIP VERO BEACH, FL 32969 ☐ Change ☒ Addition

TITLE VPD
NAME DIMAURO, JOSEPH
STREET ADDRESS 6475 5TH ST
CITY-ST-ZIP VERO BEACH FL 32968 ☐ Delete

TITLE TD
NAME NEWMAN, Paul A.
STREET ADDRESS 2926 PIPER DR.
CITY-ST-ZIP VERO BEACH, FL 32960 ☐ Change ☒ Addition

TITLE SD
NAME CAMPBELL, PENNY
STREET ADDRESS 6170 4TH ST
CITY-ST-ZIP VERO BEACH FL 32968 ☐ Delete

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

TITLE TD
NAME VOYLES, R. MARSHALL JR
STREET ADDRESS 395-13TH AVE
CITY-ST-ZIP VERO BEACH FL 32962 ☒ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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:

PAUL A. NEWMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/02

Date

772-299-2242

Daytime Phone #

CR2E037 (9/01)