

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N15741

1. Entity Name

PASCO DIXIE YOUTH LEAGUE, INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90084 021 ****61.25

Principal Place of Business
22627 RAILROAD AVE
SAN ANTONIO FL 33576
US

Mailing Address
P.O. BOX 205
SAN ANTONIO FL 33576-0205
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-2718789

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

SCHRADER, TERRY
32745 PENNSYLVANIA AVENUE
SAN ANTONIO FL 33576

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

Terry Schrader *Terry Schrader*

3-30-2000

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 SD
NAME HOBBS, TRAVIS
STREET ADDRESS 14027 HUDSON LANE
CITY-ST-ZIP DADE CITY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD
NAME HOBBS, TRAVIS
STREET ADDRESS 14027 HUDSON LANE
CITY-ST-ZIP DADE CITY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD
NAME ALSTON, JEFF
STREET ADDRESS 7441 FORT KING ROAD
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME ALSTON, JEFF
STREET ADDRESS 7441 FORT KING ROAD
CITY-ST-ZIP ZEPHYRHILLS FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD
NAME GUDE, DAVID
STREET ADDRESS 16143 JESSAMINE RD.
CITY-ST-ZIP DADE CITY FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME SCHRADER, TERRY
STREET ADDRESS 31414 PASCO ROAD
CITY-ST-ZIP SAN ANTONIO FL

TITLE
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:

Terry Schrader

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-30-2000 352-588-3141

Date

Daytime Phone #

CR2E037 (9/99)