## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 20, 2002 8:00 am Secretary of State DOCUMENT # **N19049** 1. Entity Name 05-20-2002 90082 039 \*\*\*\*61.25 CAPITAL SOCCER ASSOCIATION, INC. Mailing Address Principal Place of Business P.O. BOX 10813 2106 OLIVIA DR TALLAHASSEE FL 32308 TALLAHASSEE FL 32302-2813 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2809388 Not Applicable \$8.75 Additional Zip < Country -Zip -- ~ --Country -5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) CLARY, LOWELL R 3106 OLIVIA DR D۲. TALLAHASSEE FL 32308 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition ☐ Change ☐ Delete TITLE TITLE NAME BURNSIDE, SKIP NAME STREET ADDRESS STREET ADDRESS RT 17 BOX 1296 CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32308 Director Change Addition TITLE □ Delete TITLE NAME NAME CLARY, LOWELL R STREET ADDRESS STREET ADDRES 2106 OLIVIA DR CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32308 Delete ☐ Change Addition TITLE TITI F HUDSON, CHESTER NAME STREET ADDRESS STREET ADDRESS 9485 OLD ST. AUGUSTINE RD. CITY-ST-ZIP CITY-ST-ZIF TALLAHASSEE FL 32311 ☐ Change Addition ☐ Delete TITLE WESTMORELAND, VICKI C NAME NAME STREET ADDRESS STREET ADDRESS **PO BOX 845** CITY-ST-ZIP CITY-ST-ZIP WACISSA FL 32361 Directol Change ☐ Addition ☐ Delete TIT1 F TITLE NAME MARSHALL, BRIGETTE H. NAME STREET ADDRESS STREET ADDRESS 6703 Pemona CT CITY-ST-ZIP CITY-ST-ZIE TALLAHASSEE FL 32311 Director Change Addition ☐ Delete TITLE TITLE NAME COHEN, BOB NAME STREET ADDRESS STREET ADDRESS 1301 LAWNDALE RD.

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.

CITY-ST-ZIP

SIGNATURE:

TALLAHASSEE FL 32311

CITY-ST-ZIP

<u>reland Evicki C. Westmorelar</u>

997-409

FILED

attachment

N19049 792112

## Florida Department of State Division of Corporations 2002 Uniform Business Report

Additional Officers and Directors:

P Greg Jenkins 4740 Pintail Dr. Tallahassee, Fl 32317

V Chris Moran 1918 Vineland Dr. Tallahassee, FL 32311

D Sharon Russell 5108 Centennial Oaks Circle Tallahassee, FL 32308

D Lynn Hepner 1261 Burnwell Rd. Tallahassee, FL 32311

D Verena Fields 2276 Hampshire Way Tallahassee, FL 322308

D Mark Pelt 7004 Azusa Rd. Tallahassee, FL 32311

D Sean Johnson 3216 N. Shannon Lakes Tallahassee, FL 32308

D Yashica Squire 2651 Baldwin Dr. S. Tallahassee, FL 32309

D Vernice Ashby 1800 Miccosukee Commons #916 Tallahassee, Fl 32301