

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N22949

1. Entity Name

PANHANDLE SOCCER REFEREES ASSOCIATION, INC.

Principal Place of Business

C/O BILL JANSON
6008 SOMERSET DR
PENSACOLA FL 32526
US

Mailing Address

PO BOX 11183
PENSACOLA FL 32524
US

2. Principal Place of Business

c/o Eric Johnson

Suite, Apt. #, etc.

409 Kilkenny Way

City & State

Cantonment, FL

Zip

32533

Country

Escambia

3. Mailing Address

P. O. Box 10487

Suite, Apt. #, etc.

City & State

Pensacola, FL

Zip

32533

Country

Escambia

6. Name and Address of Current Registered Agent

MILLHAM, DANIEL
4449 THOMASTOWN DRIVE
MILTON FL 32571

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

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

After September 13, 2000 min. will be \$236.25

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

TITLE PD
NAME JANSON, BILL
STREET ADDRESS 6008 SOMERSET DR
CITY-ST-ZIP PENSACOLA FL 32526 ☒ Delete

TITLE VD
NAME ZITO, BETT
STREET ADDRESS 505 BEAR DRIVE
CITY-ST-ZIP GULF BREEZE FL 32561 ☒ Delete

TITLE SD
NAME VADENACKER, STEVE
STREET ADDRESS 2757 OAKLEY CT
CITY-ST-ZIP GULF BREEZE FL 32561 ☒ Delete

TITLE TD
NAME MILLHAM, DANIEL
STREET ADDRESS 4449 THOMASTOWN DR
CITY-ST-ZIP MILTON FL 32571 ☒ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Eric Johnson
STREET ADDRESS 409 Kilkenny Way
CITY-ST-ZIP Cantonment, FL 32533

TITLE VD ☒ Change ☐ Addition
NAME Dennis Bianco
STREET ADDRESS 4645 Treeline Drive
CITY-ST-ZIP Pensacola, FL 32504

TITLE SD ☒ Change ☐ Addition
NAME Bett Zito
STREET ADDRESS 505 Bear Drive
CITY-ST-ZIP Gulf Breeze, FL 32561

TITLE TD ☒ Change ☐ Addition
NAME Kelly Skidmore
STREET ADDRESS 6159 Syrcle Ave.
CITY-ST-ZIP Milton, FL 32571

TITLE ☐ Change ☐ Addition
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/6/00

Date

8509687742

Daytime Phone #

CR2E037 (5/00)

FILED
Aug 09, 2000 8:00 am
Secretary of State

08-09-2000 90082 023 ****61.25



DO NOT WRITE IN THIS SPACE