2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N26887

1. Entity Name

HEARTLAND YOUTH FOOTBALL INC.



FILED Mar 17, 2003 8:00 am Secretary of State

03-17-2003 90084 002 ****61.25

		Mailing Address 5341 LIME ROAD	341 LIME ROAD EBRING FL 33872		1				
SEBRING FL 33872 SE		SEBRING FL 33872 US				A Bilan (Bjöl (Bil) (Bil) Andle)	JIDN 51811 BIBN 817		
2. Principal Place of Business 3.		3. Mailing Address	. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		To the second	4. FEI Number NOT APPLICABLE Applied For Not Applicable				
Zip Country		Zip	Zip Country		5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name and Address of Curre	nt Registered Agent		News	7. Name and Addr	ess of New Registere	d Agent		
WEED	A1450 1 10			Name					
5341 LIM	AMES L., JR IE RD 5 FL 33872			Street Address (P.O. Box Number is Not Acceptable)					
SEDNING	FL 330/2			City		F	Zip Cod	e	
8. The above	named entity submits this statemen	t for the purpose of changing	ite ragietara	d office or register	red agent or both in th	-	— I	and accont	
	tions of registered agent.	to the purpose of chariging	no regiotere	od omoc or register	red agent, or both, in the		Trammar with,	and accept	
SIGNATURE									
	Signature, typed or printed name of registered ag	ent and title if applicable. (N	OTE: Registered	d Agent signature required	d when reinstating)	DATE			
ţ.	FILE NOW: FEE IS \$61.25	9. Election C Trust Fund	ampaign F d Contributi	~ —	\$5.00 May Be Added to Fees	Make Che Florida Depa	ck Payable artment of S		
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGE	S TO DESICEDS AND I	DIDECTORS IN	10	
TITLE	P	Directions Delete	TITLE		ADDITIONS/CHANGE:	S TO OFFICERS AND I	☐ Change	Addition	
NAME	WEED, JAMES L., JR.	□ Delete	NAME				□ Ollarige	☐ Vadition	
STREET ADDRESS	5341 LIME DRIVE			ET ADDRESS					
CITY-ST-ZIP	SEBRING FL		CITY	-ST-ZIP					
TITLE	VPD	☐ Delete	TITLE				☐ Change	Addition	
NAME	EVERY, MARK		NAME	ſ	_				
STREET ADDRESS	611 3RD CRT SW		STRE	ET ADDRESS					
CITY-ST-ZIP	FORT MEADE FL 33841		CITY-	-ST-ZIP					
TITLE	TSD	☐ Delete	TITLE		D		Change	☐ Addition	
NAME	LAMMIE, LORRI		NAME						
STREET ADDRESS	8 VICTORY WAY			ET ADDRESS					
CITY-ST-ZIP	LAKE PLACID FL 33852		CITY-	-ST-ZIP					
TITLE	VPD	☐ Delete	TITLE				Change	Addition	
NAME	CRAWFORD, VEREEN		NAME						
STREET ADDRESS CITY-ST-ZIP	179 CHAMBERS COURT			ET ADDRESS ST-ZIP					
	WAUCHULA FL 33873	<u> </u>							
title Name		Delete	TITLE	77	ע האינה אם ה	Tro	Change	Addition	
STREET ADDRESS	i Green	· ·•	NAME STREE	T ADDRESS 22	MBERLY OF	LEK 5 Ave			
CITY-ST-ZIP	-	· 		ST-ZIP	AKE PLACE	D E/ 27	8 6-7		
TITLE	<u> </u>	☐ Delete	TITLE)	10, FL 30 (☐ Change	Addition	
NAME		C Detete	NAME				□ change	Addition	
STREET ADDRESS				T ADDRESS 325	LLIS BEACH	M BLd.			
CITY-ST-ZIP			CITY-	ST-ZIP	KE PLACET	D E/ 728	\Box		
12. Thereby o	certify that the information supplied w	ith this filing does not qualify t	for the ever	notion stated in Ca	otion 110 07/2\(i\) Flasi	Chatutan 1 Suntana			

2. I nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Floridal 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, Floridal 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:

3-10-03 (863)385-234