

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N29365

FILED
Sep 03, 2003
Secretary of State

Entity Name: WEST BOCA YOUTH BASEBALL, INC.

Current Principal Place of Business:

10763 SHADY POND LANE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

10763 SHADY POND LANE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-0094087

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCAHON, BRIAN
7301-A W. PALMETTO PARK ROAD,
SUITE 305C
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: CHRISTINE, MAREK
Address: 10763 SHADY POND LANE
City-St-Zip: BOCA RATON, FL 33428

Title: PD () Delete
Name: MCGRATH, ROBERT
Address: 9599 LANCASTER PLACE
City-St-Zip: BOCA RATON, FL 33434

Title: VD () Delete
Name: GOBTNER, BRUCE
Address: 22220 WATERSLIDE CIR.
City-St-Zip: BOCA RATON, FL 33428

Title: S () Delete
Name: KAPLAN, PETER
Address: 11989 HARBOR SPRINGS CIRCLE
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: MC GRATH, ROBERT
Address: 9599 LANCASTER PLACE
City-St-Zip: BOCA RATON, FL 33434

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINE MAREK

TD

09/03/2003

Electronic Signature of Signing Officer or Director

Date