

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N38112

FILED
Jul 28, 2003
Secretary of State

Entity Name: SOUTHEASTERN REGIONAL POP WARNER ASSOCIATION, INC.

Current Principal Place of Business:

6847 TANGO LANE N.
JACKSONVILLE, FL 32210 US

New Principal Place of Business:

Current Mailing Address:

6847 TANGO LANE N.
JACKSONVILLE, FL 32210 US

New Mailing Address:

FEI Number: 65-0192532

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONNORS, DENNIS B.
6847 TANGO LANE N.
JACKSONVILLE, FL 32210 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: D () Delete
Name: CHANCEY, TERRY,
Address: 10444 MOORE RD
City-St-Zip: GOTH, FL

Title: D () Delete
Name: CONNORS, DENNIS B.
Address: 6847 TANGO LANE N.
City-St-Zip: JACKSONVILLE, FL

Title: D () Delete
Name: MILLER, LORI
Address: 5520 LIDO ST.
City-St-Zip: ORLANDO, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: DENNIS B. CONNORS

D

07/28/2003

Electronic Signature of Signing Officer or Director

_____ Date