

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N41761

FILED
Apr 19, 2002 8:00 AM
Secretary of State

Entity Name: NEW TAMPA LITTLE LEAGUE, INC.

Current Principal Place of Business:

8050 KINNAN ST.
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 46847
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 59-3015624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOEHLER, BRUCE
9411 ROCK ROSE DR
TAMPA, FL 33647 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: PD () Delete
Name: GLANTZ, STEVEN
Address: 18106 ROYAL FOREST DR
City-St-Zip: TAMPA, FL 33647

Title: VPD () Delete
Name: CAPEZZUTO, DAVID
Address: 18140 SWEET JASMINE DR
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: WOODEN, MONICA
Address: 9108 WOODRIDGE RUN DR
City-St-Zip: TAMPA, FL 33647

Title: TD () Delete
Name: KOEHLER, BRUCE
Address: 9411 ROCKROSE DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: FILER, FRED
Address: 15301 BURSLEY CT.
City-St-Zip: TAMPA, FL 33647

Title: SD (X) Change () Addition
Name: CAMP, MEGAN
Address: 4972 EBENSBURG DR.
City-St-Zip: TAMPA, FL 33647

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: BRUCE KOEHLER

TD

04/19/2002

Electronic Signature of Signing Officer or Director

Date