

2000 UNIFORM BUSINESS REPORT (UBR)

5/2.

FILED

Jun 29, 2000 8:00 am
Secretary of State

05-24-2000 90057 039 ****61.25

DOCUMENT # N45930

1. Entity Name

SOUTH FT. MYERS LITTLE LEAGUE, INC.

R

Principal Place of Business

Mailing Address

9131 COLLEGE PARKWAY
SUITE 13-B
FORT MYERS FL 33919-4816
US

9131 COLLEGE PARKWAY
SUITE 13-B
FORT MYERS FL 33919-4827
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0293855

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDERSON, WM. W.
11595 KELLY RD
SUITE 218
FT. MYERS FL 33908

Name Myers, Jim
Street Address (P.O. Box Number is Not Acceptable)
3953 Blerheem St.
City Ft Myers 33919 FL Zip Code 33919

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 re-registering)

DATE

FILE NOW:
FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Delete
NAME	ANDERSON, WILLIAM	
STREET ADDRESS	12366 MCGREGOR WOODS CR	
CITY-ST-ZIP	FT MYERS FL	
TITLE	VPD	☐ Delete
NAME	HAWKINS, CLARK	
STREET ADDRESS	3627 KNOLLWOOD RD	
CITY-ST-ZIP	FT. MYERS FL 33919	
TITLE	SD	☐ Delete
NAME	MYERS, JENN	
STREET ADDRESS	3953 BLERHEEM ST	
CITY-ST-ZIP	FT. MYERS FL 33912	
TITLE	TD	☐ Delete
NAME	PONTIFF, JOE	
STREET ADDRESS	13410 ALMONE DR	
CITY-ST-ZIP	FORT MYERS FL 33908	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	☒ Change ☐ Addition
NAME	Myers, Jim	
STREET ADDRESS	3953 Blerheem ST	
CITY-ST-ZIP	FT MYERS, FL 33912	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME	Tevis McKinstry	
STREET ADDRESS	6585 Sandspurdane	
CITY-ST-ZIP	Ft Myers, FL 33919	
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 19.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)