# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Jan 30, 2002 8:00 am**
**Secretary of State**
01-30-2002 90107 046 ****61.25

0066131

DOCUMENT # N49101

1. Entity Name

WEST VOLUSIA POLICE ATHLETIC LEAGUE, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 200 WEST VERMONT AVE<br>DELAND FL 32720<br>US | P O BOX 3642<br>DELAND FL 32721-0569<br>US |

DO NOT WRITE IN *THIS SPACE*

| 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 59-3148576 ☐ 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 |
|---|---|
| LAMBERT, BOBBY J<br>200 W VERMONT AVE<br>DELAND FL 32720 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City **FL** Zip Code |

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 Lt. Bobby J. Lambert, Executive Director Bobby J. Lambert 01/09/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SMITH, ROGER<br>135 W NEW YORK AVE<br>DELAND FL | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V<br>ALTIER, JEFF<br>431 N WOODLAND BLVD UNIT 8359<br>DELAND FL 32720 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V<br>Ford, Alex<br>145 E. Rich<br>DeLand, FL<br>☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>FORD, FRANK A. JR<br>145 E RICH AVE<br>DELAND FL | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>Kaiser, Fred H.<br>P. O. Box 2813<br>DeLand, FL<br>☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>BLAIS, STEPHEN<br>4168 NORTH GRAND AVENUE<br>DELAND FL | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>Locke, Connie<br>409 Sandy Lane<br>Deltona, FL.<br>☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>DILLIGARD, LARRY<br>400 SPRING GARDEN AVE<br>DELAND FL | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>KAISER, ROCKY<br>P.O. BOX 2813 N/A<br>DELAND FL 32723 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>Dreggors, Richard<br>806 Bay Tree Circle<br>DeLand, FL<br>☒ Change ☐ Addition |

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 REQUIRED Fred H. "Rocky" Kaiser, President 1/9/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #