

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N50365

1. Entity Name

GREATER DELAND YOUTH FOOTBALL ASSOCIATION, INC.

Principal Place of Business

Mailing Address

840 W KICKLIGHTER RD
LAKE HELEN FL 32744
US

840 W KICKLIGHTER RD
LAKE HELEN FL 32744
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

59-3142274

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

DITSLEAR, C R
108 W RICH AVE
DELAND FL 32720

Name Paulette D Smith

840 W Kicklighter Rd

City Lake Helen

FL

Zip Code 32744

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

Paulette Smith

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
After September 12, 2001, min. will be \$236.25

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 VD
NAME DITSLEAR, ROBERT E
STREET ADDRESS 761 OLD TREELINE TRAIL
CITY-ST-ZIP DELAND FL ☒ Delete

TITLE Ray, Leroy Treasure
NAME
STREET ADDRESS 720 E. New St.
CITY-ST-ZIP Deland, FL 32724 ☐ Change ☒ Addition

TITLE SD
NAME SIEG, RACHEL
STREET ADDRESS 325 N FRANKFORT AVE
CITY-ST-ZIP DELAND FL 32724 ☒ Delete

TITLE Monroe, Alicia Secretary
NAME
STREET ADDRESS 526 S. Thompson St.
CITY-ST-ZIP Deland, FL 32720 ☐ Change ☒ Addition

TITLE TD
NAME TULLY, KAHTLEEN M
STREET ADDRESS 993 FATTO RD.
CITY-ST-ZIP DELAND FL ☒ Delete

TITLE Marlon Harris
NAME
STREET ADDRESS 3131 Maple Shade
CITY-ST-ZIP Deland FL 32738 ☐ Change ☒ Addition

TITLE PD
NAME SMITH, PAULETTE D
STREET ADDRESS 840 W. KICKLIGHTER RD
CITY-ST-ZIP LAKE HELEN FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME HARRIS, DARRYL D.
STREET ADDRESS 615 S. PARSONS AVE.
CITY-ST-ZIP DELAND FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME DITSLEAR, DIANE E
STREET ADDRESS 761 OLD TREELINE TRAIL
CITY-ST-ZIP DELAND FL ☒ Delete

TITLE Pamika Joyce
NAME
STREET ADDRESS 647 S. Thompson
CITY-ST-ZIP Deland FL 32720 ☐ Change ☒ Addition

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: Paulette Smith

09-30-2001 286-228-3202

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
01-DEC 12 AM 11:53



08-07-01 90013-025 \$61.25

CR2E037 (5/01)