

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90208 008 ****61.25

DOCUMENT # N92000000104

1. Entity Name

LEE COUNTY SPORTS OFFICIALS, INC.



Principal Place of Business

**318 SE 43RD LANE
CAPE CORAL FL 33904**

Mailing Address

**318 SE 43RD LANE
CAPE CORAL FL 33904**

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 **65-0368966**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**VALENTE, SAL
318 SE 43 LANE
CAPE CORAL FL 33904**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

SAL VALENTE **SAL VALENTE, PRESIDENT**

4-14-2003

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PTM** ☐ Delete
NAME **VALENTE, SAL**
STREET ADDRESS **318 SE 43 LANE**
CITY-ST-ZIP **CAPE CORAL FL 33904**

TITLE **D** ☐ Delete
NAME **HANGER, ED**
STREET ADDRESS **1210 SW 8TH CT**
CITY-ST-ZIP **CAPE CORAL FL 33991**

TITLE **D** ☐ Delete
NAME **SANTIAGO, LAUREANO**
STREET ADDRESS **3220 LA COSTA CIR APT 101**
CITY-ST-ZIP **NAPLES FL 34105**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE **D** ☒ Change ☐ Addition
NAME **HANGER, ED**
STREET ADDRESS **1936 NE 5TH ST**
CITY-ST-ZIP **CAPE CORAL FL 33909**

TITLE **D** ☒ Change ☐ Addition
NAME **SANTIAGO, LAUREANO**
STREET ADDRESS **21745 WINDHAM WAY**
CITY-ST-ZIP **ESTERO FL 33928**

TITLE **V D** ☐ Change ☒ Addition
NAME **LACKEY, JOHN**
STREET ADDRESS **21151 LAZY D FARM RD**
CITY-ST-ZIP **ESTERO FL 33928**

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 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:

SAL VALENTE **SAL VALENTE**

4-14-03 2399451440

CR2E037 (10/02)