

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Apr 25, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # N93000001876****1. Entity Name**  
SEMINOLE COUNTY POLICE ATHLETIC LEAGUE, INC.**Principal Place of Business**  
SEMINOLE COUNTY SHERIFF OFFICE  
SANFORD FL  
**Mailing Address**  
100 BUSH BV  
SANFORD FL 32773**2. Principal Place of Business**  
Suite, Apt. #, etc.  
**3. Mailing Address**  
Suite, Apt. #, etc.**City & State**  
City & State  
**Zip** **Country** **Zip** **Country**  
**4. FEI Number**  
**59-3196445**  
**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**  
**Applied For**  
**Not Applicable**

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**  
ZEH JOHN W  
100 BUSH BV  
SANFORD FL 32773  
**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.****SIGNATURE** **04/25/2001**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE**FILE NOW:**  
**FEE IS \$61.25**  
**9. Election Campaign Financing** ☐ **\$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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
DV	MCNEIL WILLIAM	4195 S. HIGHWAY 17-92	CASSELBERRY FL 32707				
DTS	NEGRI JOHN E	100 BUSH BV	SANFORD FL 32773				
DP	MEDLEY DAVID	400 AIRPORT BV	SANFORD FL 32773				
DM	REHDER MARK	100 BUSH BV	SANFORD FL 32773				

**12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(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:** Mark Rehder **Dire** **04/25/2001**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E037 (11/00)