

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2001 8:00 am
Secretary of State

DOCUMENT # N93000004745

1. Entity Name

EAST MANATEE YOUTH FOOTBALL ASSOCIATION, INC.

05-16-2001 90024 041 ****61.25
 08-01-2001 90199 038 ****61.25

00060413



DO NOT WRITE IN THIS SPACE

Principal Place of Business 6208 FOX HOLLOW LANE BRADENTON FL 34202 US		Mailing Address PO BOX 21091 BRADENTON FL 34203-1091 US	
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 NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HALL, ROBERT 6208 FOX HOLLOW LANE BRADENTON FL 34202		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 reinstating)

DATE

FILE NOW: FEE IS \$61.25 After September 12, 2001, min. will be \$236.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HALL, ROBERT 6208 FOX HOLLOW LANE BRADENTON FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CONSTANTINO, FRANK 10868 FOREST RUN DR BRADENTON FL 34202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARBER, ZINA 1205 30TH AVE E BRADENTON FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tammy Sanders SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 211 21st Ave. W. Bradenton, FL 34208
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MURPHY, SUSAN 6611 261ST ST E MYAKKA CITY FL 34243 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasure T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition DORCEN Miller 1016 G 2nd Ave W. Bradenton, FL 34201
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRILLAMAN, PAUL E 7175 GULF OF MEXICO DRIVE#24 LONGBOAT KEY FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition TONY J. Cardona 11303 Pine Lilly, PL Bradenton, FL 34202
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature]
SIGNATURE REQUIRED

CR2E037 (5/01)