

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000004746

1. Entity Name

MID - FLORIDA WRESTLING ASSOCIATION, INC.

**FILED**  
**May 30, 2000 8:00 am**  
**Secretary of State**

05-30-2000 90010 027 \*\*\*\*61.25

Principal Place of Business

Mailing Address

3966 LAKE MIRA DRIVE  
ORLANDO FL 32817-1646

3966 LAKE MIRA DRIVE  
ORLANDO FL 32817-1646

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

59-3149395

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

DEHLER, RICHARD F  
3966 LAKE MIRA DRIVE  
ORLANDO FL 32817-1646

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

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 V ☐ Delete  
NAME SHULTZ, RONALD N  
STREET ADDRESS 4304 S KIRKMAN RD APT 101  
CITY-ST-ZIP ORLANDO FL 32811

TITLE P ☒ Change ☐ Addition  
NAME Shultz, Ronald N  
STREET ADDRESS 2618 Clementon Park Court  
CITY-ST-ZIP Orlando FL 32835

TITLE SD ☐ Delete  
NAME WRIGHT, WILLIAM  
STREET ADDRESS 364 ALEATHA DR  
CITY-ST-ZIP DAYTONA BCH FL 32114

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

TITLE TD ☐ Delete  
NAME DEHLER, RICHARD F  
STREET ADDRESS 3966 LAKE MIRA DRIVE  
CITY-ST-ZIP ORLANDO FL 32817

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

TITLE P ☐ Delete  
NAME HEWITT, MARK  
STREET ADDRESS 3167 WINDCHIME CIR S  
CITY-ST-ZIP APOPKA FL

TITLE V ☒ Change ☐ Addition  
NAME Hewitt, Mark  
STREET ADDRESS 3167 Windchime Circle  
CITY-ST-ZIP Oviedo, FL 32765

TITLE V ☐ Delete  
NAME GARBER, WAYNE  
STREET ADDRESS 12608 BIRCHBARK CT  
CITY-ST-ZIP ORLANDO FL 32828

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

TITLE D ☐ Delete  
NAME SCOTT, NAGLE  
STREET ADDRESS 5011 LOBLOLLY BAY LN  
CITY-ST-ZIP ORLANDO FL

TITLE D ☒ Change ☐ Addition  
NAME Scott, Nagle, Scott  
STREET ADDRESS 1606 White Dove Drive  
CITY-ST-ZIP Winter Springs FL 32708

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: Richard F. Dehler 1 May 00 407-678-1515  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)