## **2002 UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # N9300004746

## MID - FLORIDA WRESTING ASSOCIATION, INC.

## May 02, 2002 8:00 am Secretary of State 05-02-2002 90067 019 \*\*\*\*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.				DO NOT WRITE	E IN THIS SE	ACE		
				City & State				4. FEI Number Applied For				
*			, , , , , , , , , , , , , , , , , , ,				4. FEI Number	E0 014000E			ot Applicable	
, Zip Country		Zip		Coi	untry	5. Certificate of	Status Desired		<b>8.75</b> Add			
	6. Name	and Address of Current	Register	ed Agent	<u> </u>		7. Name and A	ddress of New Re	gistered Ag	ent		
ومظاليت والمت	~~~		-			_Name	<del></del>	<del></del>	حطفت	-		= =
DEHLER, RICHARD F						Street Address (P.O. Box Number is Not Acceptable)						1
	E MIRA DRI FL 32817-											7
ONDANDO	7 1 2 32017	10-10			City			FL	Zip Cod	e	1	
8. The above	e named entity	y submits this statement fo	r the purp	cose of changing its	register	ad office or regis	tered agent, or both,	in the state of Flori	da.	ł		1
SIGNATURE	•	or printed name of registered agent	and title if ap	plicable. {NOT	E: Registere	d Agent signature requi	ired when reinstating)		DATE			
					Election Campaign Financing Trust Fund Contribution.			Make Check Payable to Department of State				
10.		OFFICERS AND DI	RECTORS	3	11.		ADDITIONS/CHAP	NGES TO OFFICER	S AND DIRE	CTORS IN	10	1_
NAME STREET ADDRESS	P FLECKMAI 10604 WH	ITMAN		☐ Delete		E ET ADDRESS			l	☐ Change	☐ Addition	F037 (9/01
CITY-ST-ZIP	ORLANDO	FL 32821			-	-ST-ZIP				<b>-</b>		SP
TITLE NAME	SD Wright, William			☐ Delete TI					l	Change	☐ Addition	0
STREET ADDRESS	364 ALEAT			ET ADDRESS						'		
CITY-ST-ZIP	DAYTONA	BEACH FL 32114			CITY	-ST-ZIP						
TITLE	DEHLER, F	ICHADD C		☐ Delete	TITLE	1			==:[	_ Change ~	Addition	-
STREET ADDRESS		MIRA DRIVE			NAM STRE	ET ADDRESS						
CITY-ST-ZIP	ORLANDO					-ST-ZIP						
TITLE	٧			☐ Delete	TITLE	:				Change	☐ Addition	1
NAME	HEWITT, M				NAM							
STREET ADDRESS CITY-ST-ZIP	119 DALTO					ET ADDRESS -ST-ZIP						
TITLE	OVIEDO FL	. 32/65		☐ Delete	-	-		•	r	Change	Addition	-
NAME	STROUSE.	MICHAEL H		□ Delete	TITLE				L		Addition	}
STREET ADDRESS	161 TEMPL				STRE	ET ADDRESS						
CITY-ST-ZIP	ORLANDO	FL 32825			CITY	-ST-ZIP						
TITLE	D	0.5		☐ Delete	TITLE		/ ^	11	<b>\</b>	Change	☐ Addition	
NAME STREET ADDRESS	SCOTT, NA				NAM	:  /]a.	g/a, 90	LOET	•			
STREET ADDRESS CITY-ST-ZIP		e dove drive Prings fl 32708				ET ADDRESS -ST-ZIP	<b>v</b> '					
		TINGS FL 32/08 information supplied with t or supplemental report is	this filing	does not qualify for			Section 119.07(3)(i)	Florida Statutes. I fe	urther certify	that the in	nformation	1
indicatéd	on this repor	t or supplemental report is	true and	accurate and that n	nv signat	ure shall have the	e same legal effect s	s if made under on	th: that I am	an officer	or director	1

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.