

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N93000005139

FILED
Sep 17, 2002
Secretary of State

Entity Name: TOWN 'N COUNTRY PACKER YOUTH FOOTBALL, INC.

Current Principal Place of Business:

P.O. BOX 262144
TAMPA, FL 336852144

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 262144
TAMPA, FL 336852144

New Mailing Address:

FEI Number: 65-0430014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, RHONDA
11308 PARTRIDGE DR
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTIN, RHONDA
Address: 11308 PARTRIDGE DR
City-St-Zip: TAMPA, FL 33615

Title: VPD () Delete
Name: CABRERA, MARIE
Address: 7248 MONTEREY BLVD.
City-St-Zip: TAMPA, FL 33625

Title: STD () Delete
Name: PIERSON, MICHELLE
Address: 8722 WATER WAY DRIVE
City-St-Zip: TAMPA, FL 33635

Title: VPA () Delete
Name: MCFARLAND, XXXXX
Address: 8586 BRIAR GROVE CIRCLE
City-St-Zip: TAMPA, FL 33615

Title: VPA () Delete
Name: BAGGERLY, TINA
Address: 7610 W POWHATTAN AVENUE # 4
City-St-Zip: TAMPA, FL 33615

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: BARTOLOMEI, ADA
Address: 8701 VERANDA WAY
City-St-Zip: TAMPA, FL 33635

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPA (X) Change () Addition
Name: MCFARLAND, CHUCK
Address: 8586 BRIAR GROVE CIRCLE
City-St-Zip: TAMPA, FL 33615

Title: VPA (X) Change () Addition
Name: FRAUENFELD, TINA
Address: 7512 CLEARVIEW DRIVE
City-St-Zip: TAMPA, FL 33634

Title: VPD () Change (X) Addition
Name: RIQUELMY, MARITZA
Address: 9315 CRANDON LANE
City-St-Zip: TAMPA, FL 33635

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RHONDA MARTIN

PD

09/17/2002

Electronic Signature of Signing Officer or Director

Date