## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N93000005275

FILED Apr 29, 2003 Secretary of State

Entity Name: ST. PETERSBURG/CLEARWATER AREA SPORTS FOUNDATION, INC.

Current Principal Place of Business:					New Principal Place of Business:		
4040 N. HIN TAMPA, FL		S					
Current Mailing Address:					New Mailing Address:		
P.O. BOX 1	ANDER & FIS 954 SBURG, FL		.A. US				
FEI Number:	59-3252258	FEI Nur	nber Applied For()	FEI Num	ber Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current R	Registered Agent:		Name and Address of	of New Registered Agent:	
721 1ST AV	ER & FISCHE /E N SBURG, FL :		US		FISCHER, H J MR. 721 1ST AVE N ST PETERSBURG, F	L 33713 US	
The above in the State		submits t	his statement for the p	urpose of	changing its registere	d office or registered agent, or both,	
SIGNATURE: H. JAMES FISCHER						04/29/2003	
	Electro	nic Signat	ure of Registered Age	nt		Date	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DC ( REPPER, W J 3268 SAN MAT CLEARWATER	TEO ST	)		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DS ( CATOE, PAUL 400 N. TAMPA TAMPA, FL 33	ST#1010			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DT ( ORCHARD, GF PO BOX 420 TAMPA, FL 33				Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVC (CAMPBELL, R400 CHANNELTAMPA, FL 33	SIDE DR			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	P ( BARTOW, ROS 4040 N HIMES TAMPA, FL 33	S AVE			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PC ( ZEIGLER, LEE 2614 W KENN TAMPA, FL 33	IEDY BLVD			Title: Name: Address: City-St-Zip:	() Change () Addition	

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: ROSS BARTOW MR. 04/29/2003