

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90173 011 ****61.25

DOCUMENT # N94000001762

1. Entity Name

KISSIMMEE YOUTH FOOTBALL LEAGUE, INC.

Principal Place of Business

Mailing Address

**100 LAKESHORE BLVD.
 KISSIMMEE FL 34744
 US**

**P.O. BOX 451343
 KISSIMMEE FL 34745-1343**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3179668

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**WALLIS, DIANA
 331 OAKHURST CIRCLE
 KISSIMMEE FL 34744**

Name **Shawn Clemons**

Street Address (P.O. Box Number is Not Acceptable)
3101 Pastures Road

City **Kissimmee**

FL

Zip Code **34746**

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 *Shawn Clemons*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/12/02

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 NAME STREET ADDRESS CITY-ST-ZIP	PD GLUNT, ROSS 13350 N LYNELLE DRIVE KISSIMMEE FL 34741	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GRAY, TODD 1601 GRANADA BLVD. KISSIMMEE FL 34746	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD POWELL, REBECCA M 219 POINCIANA CIRCLE KISSIMMEE FL 34741	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CALABRO, JOANNE 1430 SHEANA LANE KISSIMMEE FL 34744	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAKER, VANNA 101 PARK PLACE BLVD. # 1 KISSIMMEE FL 34742	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT CHRISTOPHER P. SHOURDS 2891 RODEO DRIVE Kissimmee, FL 34746	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Sallie Small 280 Celebration Blvd. Celebration, FL 34747	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER PATRICIA PARKER 4165 EAST VISTA COURT Kissimmee, FL 34746	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHEERLEADING DIRECTOR CHARLENE BRUNK 1726 Golfview Drive Kissimmee, FL 34746	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COMMISSIONER/FOOTBALL DIRECTOR JUAN ORTEGA 1816 BROWN STREET Kissimmee, FL 34741	☐ Change ☒ 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: *Patricia Parker* **PATRICIA PARKER - TREASURER** 3-6-02 407-933-7347
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)