

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 16, 2003 8:00 am
Secretary of State

05-05-2003 90279 028 ****70.00

DOCUMENT # N94000003734					
1. Entity Name COCOA YOUTH FOOTBALL ASSOCIATION, INC.					
Principal Place of Business 1881 ROSETINE ST. STRADLEY PARK COCOA FL 32922			Mailing Address P.O. BOX 236113 COCOA FL 32923-6113		
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 59-3258954
6. Certificate of Status Desired ☒					Applied For ☐ Not Applicable
8. Name and Address of Current Registered Agent HURST, WILLIAM W 622 LAKE TAHOE DRIVE COCOA FL 32928					7. Name and Address of New Registered Agent Name <u>Timothy R. Jackson</u> Street Address (P.O. Box Number is Not Acceptable) <u>2953 Pebble Creek Street</u> City <u>Melbourne</u> FL <u>32935</u>
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Timothy R. Jackson</u> Signature, typed or printed name of registered agent and title if applicable.		<u>Timothy R. Jackson</u> (NOTE: Registered Agent signature required when reinstating)		<u>4/30/03</u> 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 Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME HURST, WILLIAM W STREET ADDRESS 622 LAKE TAHOE DRIVE CITY-ST-ZIP COCOA FL 32928	☒ Delete		TITLE President NAME Tim Jackson STREET ADDRESS 2953 Pebble Creek Street CITY-ST-ZIP Melbourne, FL 32935	☒ Change ☐ Addition	
TITLE VD NAME HARDY, SHELLY STREET ADDRESS 4351 PONDS DRIVE CITY-ST-ZIP COCOA FL 32927	☒ Delete		TITLE Vice-President NAME Tammy Ollis STREET ADDRESS 140 Grace Avenue CITY-ST-ZIP Cocoa, FL 32922	☒ Change ☒ Addition	
TITLE TD NAME RIVERA, JOSE R JR. STREET ADDRESS 5365 ARECA PALM STREET CITY-ST-ZIP COCOA FL 32927	☒ Delete		TITLE Secretary NAME Rocky Johnson STREET ADDRESS 2654 Trotters Trail CITY-ST-ZIP Cocoa, FL 32926	☒ Change ☒ Addition	
TITLE C NAME COWAN, JAMES STREET ADDRESS 5330 MONROE AVE CITY-ST-ZIP COCOA FL 32927	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Change ☐ Addition	
TITLE SD NAME SPRATT, ELVIRA R STREET ADDRESS 1321 S STETSON DR CITY-ST-ZIP COCOA FL 32922	☐ Delete		TITLE Treasurer NAME STREET ADDRESS CITY-ST-ZIP 	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	☐ Delete		TITLE Director NAME Wlysses Guest STREET ADDRESS 1647 Sunhome street CITY-ST-ZIP Cocoa FL 32922	☐ 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: <u>Timothy R. Jackson</u> <u>4/30/03</u> <u>381-48-6261</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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☒ CHECK HERE IF MAKING CHANGES

CR2E037 (10/02)