

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N94000006155

FILED  
Apr 19, 2002 8:00 AM  
Secretary of State

**Entity Name:** SOUTH DAYTONA-HALIFAX LITTLE LEAGUE, INC.

**Current Principal Place of Business:**

1727 1/2 EASTERN RD  
SOUTH DAYTONA, FL 32119 US

**New Principal Place of Business:**

1700 JAMES STREET  
SOUTH DAYTONA, FL 32119 US

**Current Mailing Address:**

P.O. BOX 15110  
DAYTONA BEACH, FL 32115

**New Mailing Address:**

**FEI Number:** 59-3294535

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DORAN, THEODORE R  
444 SEABREEZE BLVD.  
SUITE 800  
DAYTONA BEACH, FL 32118 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: DP ( ) Delete  
Name: SYENS, DANA  
Address: 793 SILVER POND DR  
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: DVP (X) Delete  
Name: MCCORMICK, JOHN  
Address: 581 WESTPORT DRIVE  
City-St-Zip: PORT ORANGE, FL 32127

Title: DST ( ) Delete  
Name: SCOFIELD, SUSAN  
Address: 3546 IRISH LANE  
City-St-Zip: PORT ORANGE, FL 32119

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: SYENS, DANA

P

04/19/2002

Electronic Signature of Signing Officer or Director

Date