

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000000162

1. Entity Name

WESTERN AREA FOOTBALL LEAGUE, INC.

**FILED**  
**Feb 29, 2000 8:00 am**  
**Secretary of State**

02-29-2000 90173 027 \*\*\*\*61.25

Principal Place of Business

Mailing Address

150 SW 159TH WAY  
SUNRISE FL 33326  
US

150 S W 159TH WAY  
SUNRISE FL 33326-2252  
US

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

65-0553798

Applied For

Not Applicable

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

HOODIMAN, DAVID R  
150 S.W. 159 WAY  
SUNRISE FL 33326

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

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**  
**Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete  
NAME STROUR, LOUIS  
STREET ADDRESS 933 TANGLEWOOD CR  
CITY-ST-ZIP WESTON FL 33326

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME SLOPP, KIMBERLEY  
STREET ADDRESS 10690 S.W. 23RD STREET  
CITY-ST-ZIP DAVIE FL 33324

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME ROSE, ROBERT  
STREET ADDRESS 425 SAILBOAT CR  
CITY-ST-ZIP WESTON FL 33326

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME HOODIMAN, DAVID R  
STREET ADDRESS 150 S W 159TH WAY  
CITY-ST-ZIP SUNRISE FL 33326

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Delete  
NAME SANDAVOL, GREG  
STREET ADDRESS 730 BAYSIDE LANE  
CITY-ST-ZIP WESTON FL 33326

TITLE D ☐ Change ☒ Addition  
NAME DAVID ENGLISH  
STREET ADDRESS 20127 SW 54 PLACE  
CITY-ST-ZIP FT. LAUDERDALE, FL 33321

TITLE VP ☐ Delete  
NAME SLOPP, MARK  
STREET ADDRESS 10690 SW 23RD ST  
CITY-ST-ZIP DAVIE FL 33324

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)