

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90138 033 ****70.00

DOCUMENT # N95000001275

1. Entity Name

HOLLYWOOD LITTLE LEAGUE, INC.

Principal Place of Business

Mailing Address

920 N. 73RD WAY
 HOLLYWOOD FL 33024

920 N. 73RD WAY
 HOLLYWOOD FL 33024

2. Principal Place of Business

1630 N. 70th Ave

3. Mailing Address

1630 N. 70th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Hollywood Florida

Hollywood Florida

City & State

City & State

4. FEI Number

65-0565387

Applied For

Not Applicable

Zip

Country

33024-5650

USA

Zip

Country

33024-5650

USA

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

Name

Leeil Woods

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

1630 North 70th Avenue

Hollywood Florida

City

FL

Zip Code

33024-5650

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

Leeil Woods President

4/12/02

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 **DP** ☒ Delete
 NAME **GARDNER, CHUCK**
 STREET ADDRESS **920 N. 73 WAY**
 CITY-ST-ZIP **HOLLYWOOD FL 33024**

TITLE **President Director** ☒ Change ☐ Addition
 NAME **Leeil Woods**
 STREET ADDRESS **1630 North 70th Ave**
 CITY-ST-ZIP **Hollywood Florida 33024-5650**

TITLE **DT** ☒ Delete
 NAME **KIRCHLER, T.J.**
 STREET ADDRESS **600 NW 76 AVE**
 CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE **Treasurer Director** ☒ Change ☐ Addition
 NAME **Bonnie Murphy**
 STREET ADDRESS **1020 N. 70th Terrace**
 CITY-ST-ZIP **Hollywood Florida 33024**

TITLE **VP** ☒ Delete
 NAME **DICKENS, CHARLIE**
 STREET ADDRESS **7380 MCARTHUR PKWY**
 CITY-ST-ZIP **HOLLYWOOD FL 33024**

TITLE **Secretary Director** ☒ Change ☐ Addition
 NAME **~~Trixie Gough~~**
 STREET ADDRESS **Trixie Gough**
 CITY-ST-ZIP **1320 N. 65th Way Hollywood FL 33024**

TITLE **PA** ☒ Delete
 NAME **BROSNAN, KATHY**
 STREET ADDRESS **1610 N 69 AVENUE**
 CITY-ST-ZIP **HOLLYWOOD FL 33024**

TITLE **Vice-President Director** ☒ Change ☐ Addition
 NAME **Matt Hebright**
 STREET ADDRESS **1421 N. 64th Way**
 CITY-ST-ZIP **Hollywood Florida 33024**

TITLE **D** ☒ Delete
 NAME **WOODS, LEEIL**
 STREET ADDRESS **1630 N 70 AVENUE**
 CITY-ST-ZIP **HOLLYWOOD FL 33024**

TITLE **Player Agent Director** ☒ Change ☐ Addition
 NAME **Chuck Gardner**
 STREET ADDRESS **920 N. 73rd Way**
 CITY-ST-ZIP **Hollywood Florida 33024**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Leeil Woods

4/12/02

954-605-4621

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)