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

## DOCUMENT # N9500003029

1. Entity Name

SIGNATURE:

## UMATILLA YOUTH SPORTS ASSOCIATION, INC.



FILED Apr 25, 2003 8:00 am § Secretary of State

04-25-2003 90286 040 \*\*\*\*70.00

Principal Place of Business P.O.BOX 259 UMATILLA FL 32784		Mailing Address P.O.BOX 259 UMATILLA FL 32784						
2 Principal F	Place of Business	3. Mailing Address		<u> </u>				
z. Frincipair	riace of business	S. Walling Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State			I IO NI LIONDEL -		oplied For ot Applicable	
Zip Country		Zip Country		والمتعلق إمرا	5. Certificate of Status Desired \$8.75 Additional Fee Required			
	6. Name and Address of Current		7. Name and Address of New Registered Agent					
BOLING, PAUL 19844 SALTSDALE ROAD UMATILLA FL 32784				Street Address (P.O. Box Number is Not Acceptable)  19802 East Umatilla Blvd				
O IND CITED			0.0			<u>llmatilla l</u>		
				um	atilla		FL   zigcgd	วื84
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 Virginia d. Fenley Secretary 04/23/2003								
5	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent	signature required	when reinstating)	D	ATE	-
FILE NOW: FEE IS \$61.25  9. Election Campa Trust Fund Cont				ing	\$5.00 May Be Added to Fees		neck Payable partment of S	
10.	OFFICERS AND DI	RECTORS	11.	<del></del>	ADDITIONS/CHANGE	ES TO OFFICERS AN	D DIRECTORS IN	10
TITLE	PDT	☐ Delete	TITLE	TRI	)	<del></del>	☐ Change	Addition
NAME	ROBBINS, JOE		NAME	Vira	inia L. Penk a East Uma		•	_
STREET ADDRESS	19848 EAST ALTOONA ROAD		STREET ADDR	RESS   1988	a East Uma	tilla biva		
CITY-ST-ZIP	ALTOONA FL 32702		CITY-ST-ZIP		<u>atilla , FL 38</u>	3784		
TITLE NAME	VD Stiefeld, Mike	☐ Delete	TITLE NAME	C	ich Macha	_	☐ Change	Addition
STREET ADDRESS	21829 ROLLINGWOOD TRAIL		STREET ADDI		ish Moshe 17 <b>s</b> R 19	r		]
CITY-ST-ZIP	EUSTIS FL 32726		CITY-ST-ZIP		bona FL 3	agoa		}
TITLE	ST	Delete	TITLE				☐ Change	☐ Addition
NAME	NEWTON, CAROL		NAME					
STREET ADDRESS	450 GUERRANT STREET		STREET ADDI	1				{
CITY-ST-ZIP	UMATILLA FL 32784	——————————————————————————————————————	CITY-ST-ZIP		<del> </del>			
TITLE NAME	BRUNSON, ANGELA	☐ Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS	42333 WEST LAKE ROAD		STREET ADDR	RESS				
CITY-ST-ZIP	DELAND FL 32720		CITY-ST-ZIP			-		
TITLE	TC	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	BOOTH, DUANE K		NAME	ļ				
STREET ADDRESS CITY-ST-ZIP	41300 DIXIE AVENUE		STREET ADDR	1				
<del></del>	UMATILLA FL 32784							- Addition
TITLE NAME	MCLEOD, DAVID	Delete	TITLE NAME				Change	☐ Addition
STREET ADDRESS	335 OAK AVENUE		STREET ADDR	RESS				
CITY-ST-ZIP	UMATILLA FL 32784		CITY-ST-ZIP					
of the cor	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emp	owered to execute this report :	the exemption by signature shas required by	n stated in Se nall have the s Chapter 617	iction 119.07(3)(i), Flo same legal effect as it , Florida Statutes; and	orida Statutes. I furthe f made under oath; th d that my name appe	r certify that the in at I am an officer ars in Block 10 or	nformation or director Block 11 if
cnanged,	or on an attachment with an address,	with all other like empowered.	2		1	i		ĺ