

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000004525

1. Entity Name

FLAGLER FASTPITCH ATHLETIC SOFTBALL TEAMS, INC.

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90035 045 ****61.25

Principal Place of Business

Mailing Address

15 OLD KINGS ROAD N
PALM COAST FL 32137

P.O. BOX 353357
PALM COAST FL 32135-3357

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3375120

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WALKER, DONALD L
15 OLD KINGS ROAD NORTH
PALM COAST FL 32137

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 ☐ Delete
NAME DOSS, TED
STREET ADDRESS 1628 SOUTH DAYTONA AVE
CITY-ST-ZIP FLAGLER BEACH FL 32136

TITLE ☐ Change ☒ Addition
NAME Secretary
STREET ADDRESS Ginny Shirk
CITY-ST-ZIP 8 Armand Beach Drive
Palm Coast, FL 32137

TITLE ☐ Delete
NAME WALKER, DONALD L
STREET ADDRESS 29 BANTON LANE
CITY-ST-ZIP PALM COAST FL 32137

TITLE ☐ Change ☐ Addition
NAME Vice President
STREET ADDRESS Gary Smith
CITY-ST-ZIP 46 Woodworth Drive
Palm Coast, FL 32164

TITLE ☒ Delete
NAME MANCUSO, ROBIN
STREET ADDRESS 13 CAYUGA COURT
CITY-ST-ZIP PALM COAST FL 32137

TITLE ☐ Change ☒ Addition
NAME Eileen Boehm
STREET ADDRESS 25 Deerwood ST.
CITY-ST-ZIP Palm Coast, FL 32137

TITLE ☒ Delete
NAME FORTIER, LORI
STREET ADDRESS 60 BASSETT LANE
CITY-ST-ZIP PALM COAST FL 32137

TITLE ☐ Change ☒ Addition
NAME Director
STREET ADDRESS Beth Taylor
CITY-ST-ZIP 12 Fernwood Drive
Palm Coast, FL 32137

TITLE ☒ Delete
NAME BURNS, LAWRENCE
STREET ADDRESS 6 CORNING COURT
CITY-ST-ZIP PALM COAST FL 32137

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

TITLE ☒ Delete
NAME BURNS, HELANE
STREET ADDRESS 6 CORNING COURT
CITY-ST-ZIP PALM COAST FL 32137

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:

Donal Walker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-8-00

904-445-1822

Date

Daytime Phone #

CR2E037 (9/99)