## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000002167

FILED Apr 15, 2007 Secretary of State

Entity Name: WEST CENTRAL FLORIDA UMPIRES ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 22434 6326-D BAHAMA COURT TAMPA, FL 336222434 TAMPA, FL 33615

Current Mailing Address: New Mailing Address:

P.O. BOX 22434 TAMPA, FL 336222434

FEI Number: 59-3162360 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HEUGEL, CHARLES B RODRIGUEZ, JOSE 6910 LAKE VIEW COURT 6326-D BAHAMA COURT TAMPA, FL 33634 US TAMPA, FL 33615 US

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: JOSE RODRIGUEZ 04/15/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: HEUGEL, CHARLES B Name: RODRIGUEZ, JOSE

 Address:
 6910 LAKEVIEW COURT
 Address:
 6326-D BAHAMA COURT

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:
 TAMPA, FL 33615

Title: CT ( ) Delete Title: TR (X) Change ( ) Addition Name: VAZQUEZ, ARTURO E Name: MARINO, MARK E

Address: 4325 S. THATCHER AVE. Address: 10604 ORANGE GROVE DRIVE

City-St-Zip: TAMPA, FL 33611 City-St-Zip: TAMPA, FL 33618

Title: D ( ) Delete Title: VP (X) Change ( ) Addition Name: STONE, DAVID Name: STONE, DAVID

Address: 2807 TALLOWOOD DR Address: 915 COUNTRY CLUB DRIVE

City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: TAMPA, FL 33612

Title: ( ) Delete Title: VP ( ) Change (X) Addition

 Name:
 Name:
 KERRICK, KIP

 Address:
 Address:
 11305 N 51ST E2

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 33617

Title: ( ) Delete Title: S ( ) Change (X) Addition

Name: Name: PEREZ, CRAIG A

Address: Address: 22757 SOUTHSHORE DRIVE City-St-Zip: City-St-Zip: LAND 0 LAKES, FL 34639

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CRAIG A PEREZ, SECRETARY S 04/15/2007