

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000005215

1. Entity Name

COAST TO COAST BASKETBALL CLUB INC.



FILED
Jun 20, 2000 8:00 am
Secretary of State

06-20-2000 90012 043 ****61.25

Principal Place of Business

8115 LAGOS DE CAMPO BLVD.
TAMARAC FL 33321

Mailing Address

8115 LAGOS DE CAMPO BLVD.
TAMARAC FL 33321-3860

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

65-0709560

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

ALSTON, ERIC A
8115 LAGOS DE CAMPO BLVD.
TAMARAC FL 33321

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	ALSTON, ERIC A	
STREET ADDRESS	8115 LAGOS DE CAMPOS BLVD	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	VTD	<input type="checkbox"/> Delete
NAME	DOOLING, ERIC	
STREET ADDRESS	2016 NW 3RD COURT	
CITY-ST-ZIP	FT. LAUDERDALE FL 33311	
TITLE	SDT	<input type="checkbox"/> Delete
NAME	LYNCH, JONATHAN E	
STREET ADDRESS	4110 HUNTERS HILL CIRCLE	
CITY-ST-ZIP	FOX RIDGE MD 21133	
TITLE	D	<input type="checkbox"/> Delete
NAME	MCDUFFIE, O.J.	
STREET ADDRESS	653 SPINNAKER	
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	
TITLE	CD	<input type="checkbox"/> Delete
NAME	MITCHELL, STEFFON	
STREET ADDRESS	1221 DUNCAN PLACE N.E.	
CITY-ST-ZIP	WASHINGTON DC 20002	
TITLE	MD	<input type="checkbox"/> Delete
NAME	WAGENHEIM, RICHARD	
STREET ADDRESS	2101 NORTH ANDREWS AV	
CITY-ST-ZIP	FT. LAUDERDALE FL 33301	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(l), 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: ERIC A. ALSTON **6/15/00** **726-1474**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)