

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001046

1. Entity Name

POMPANO BEACH YOUTH BASEBALL, INC.

Principal Place of Business

C/O ERIC FOUST
8025 LAGOS DE CAMPO BLVD
TAMARAC FL 33321

Mailing Address

C/O ERIC FOUST
8025 LAGOS DE CAMPO BLVD
TAMARAC FL 33321-3862

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

FOUST, ERIC
8025 LAGOS DE CAMPO BLVD.
TAMARAC FL 33321

7. Name and Address of New Registered Agent

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 D ☐ Delete
NAME ANDERSON, STEVE
STREET ADDRESS 280 S. CYPRESS ROAD
CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE DST ☒ Delete
NAME AHRENS, ROBERT
STREET ADDRESS 401 SE 5TH TERRACE
CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE DP ☐ Delete
NAME FOUST, ERIC
STREET ADDRESS 8025 LAGOS DE CAMPO BLVD
CITY-ST-ZIP TAMARAC FL 33321

TITLE D ☐ Delete
NAME GROBAN, GARY
STREET ADDRESS 861 N.E. 9TH AVENUE
CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE D ☐ Delete
NAME SAXON, RAY
STREET ADDRESS 2061 SE 16TH STREET
CITY-ST-ZIP POMPANO BEACH FL 33060

TITLE EDVP ☐ Delete
NAME TEUTON, DOUG
STREET ADDRESS 1851 NE 28TH TERRACE
CITY-ST-ZIP POMPANO BEACH FL 33062

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Ben Hoops
STREET ADDRESS 1310 SE 6th St.
CITY-ST-ZIP Deerfield Bch, FLA. 33441

TITLE DST ☐ Change ☒ Addition
NAME Jeff Gluth
STREET ADDRESS 80 SE 10 ST.
CITY-ST-ZIP POMPANO Bch, FLA. 33060

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

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

TITLE ☐ Change ☐ Addition
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:

TEUTON, DOUG / VP

Date 1/5/00

Daytime Phone # (954) 785-2056

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90090 036 ****61.25

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DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)