

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

FILED
Feb 13, 2003 8:00 am
Secretary of State

02-13-2003 90210 007 ****61.25

DOCUMENT # N97000001099

1. Entity Name
WINNERS FEDERATION, INC.



Principal Place of Business
**3773 SW 41ST STREET
HOLLYWOOD FL 33023**

Mailing Address
**1930 TYLER STREET
HOLLYWOOD FL 33020**

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 **65-0732074**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HUNTER, DICK E.T.
1930 TYLER STREET
HOLLYWOOD FL 33020**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-4-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TBD** ☒ Delete
NAME **ALEXANDER, CECIL L**
STREET ADDRESS **83 DUCLAIR COURT**
CITY-ST-ZIP **LITTLE ROCK AR 72223**

TITLE **V/D** ☐ Change ☒ Addition
NAME **Peggy J. Goetsch**
STREET ADDRESS **8600 W. North Ave.**
CITY-ST-ZIP **Maywood, IL 60153**

TITLE **PD** ☒ Delete
NAME **POWELL, LONNY T**
STREET ADDRESS **2343 ALEXANDRIA DR, STE 200**
CITY-ST-ZIP **LEXINGTON KY 40504**

TITLE **S/D** ☐ Change ☒ Addition
NAME **Robin Metz**
STREET ADDRESS **777 Delaware Park Blvd.**
CITY-ST-ZIP **Wilmington, DE 19804**

TITLE **WCD** ☐ Delete
NAME **JACKSON, WILLIAM**
STREET ADDRESS **1747 WEST 85TH STREET**
CITY-ST-ZIP **CHICAGO IL 60620**

TITLE **P/D** ☒ Change ☐ Addition
NAME **Barbara Wilmes**
STREET ADDRESS **2 Biarritz St.**
CITY-ST-ZIP **Lido Beach, NY 11561**

TITLE **VPD** ☒ Delete
NAME **BACOLA, ANNETTE**
STREET ADDRESS **37650 PROFESSIONAL CTR DR, STE 105A**
CITY-ST-ZIP **LIVONIA MI 48154-1100**

TITLE **T/D** ☐ Change ☒ Addition
NAME **Barbara Wilmes**
STREET ADDRESS **2 Biarritz St.**
CITY-ST-ZIP **Lido Beach, NY 11561**

TITLE **CEED** ☒ Delete
NAME **KHOURY, ARTHUR M**
STREET ADDRESS **335 COMMON ST**
CITY-ST-ZIP **LAWRENCE MA 01840**

TITLE **D** ☐ Change ☐ Addition
NAME **Dan Fick**
STREET ADDRESS **1600 Quarter Horse Drive**
CITY-ST-ZIP **Amarillo, TX 79104**

TITLE **IVPD** ☒ Delete
NAME **PLASTERAS, BASIL**
STREET ADDRESS **10 MEADOW LANE**
CITY-ST-ZIP **WEST LONG BRANCH NJ 07764**

TITLE **D** ☐ Change ☒ Addition
NAME **Jim Greene**
STREET ADDRESS **158 North Avenue**
CITY-ST-ZIP **Metheun, MA 01844**

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: **Signature of Peggy J. Goetsch** **2-4-03** **7083439375**

CR2E037 (10/02)

Attachment
DOC#N9700001099

90025194

Winners Federation Inc. Directors, continued

D

Shelley J. Kalita
100 W. Randolph St. Suite 11-100
Chicago, IL 60601

D

Doug Ramsey
1100 S. McCaslin Blvd. No. 160
Superior, Colorado 80027-8614

D

Nicholas Salios
12 Evertum Circle
Plymouth Meeting, Pa. 19462-2520