

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000003711

FILED
May 21, 2002 8:00 AM
Secretary of State

Entity Name: DISABLED SPORTS USA VOLLEYBALL, INC.

Current Principal Place of Business:

921 N. VILLAGE LAKE DRIVE
DELAND, FL 32724

New Principal Place of Business:

320 W. RICH AVE.
DELAND, FL 32720

Current Mailing Address:

921 N. VILLAGE LAKE DRIVE
DELAND, FL 32724

New Mailing Address:

320 W. RICH AVE
DELAND, FL 32720

FEI Number: 59-3453524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEILKOP, CHRIS
921 N VILLAGE LAKE DR
DELAND, FL 32724 US

Name and Address of New Registered Agent:

SEILKOP, CHRIS
320 W. RICH AVE.
DELAND, FL 32720 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: CHRIS SEILKOP

05/21/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SEILKOP, CHRIS
Address: 921 NORTH VILLAGE DRIVE
City-St-Zip: DELAND, FL 32724

Title: T () Delete
Name: COGGINS, PATRICK D
Address: 421 N WOODLAND BLVD
City-St-Zip: DELAND, FL 32724

Title: T () Delete
Name: SULLIVAN, JOE
Address: 4505 FORT MCHENRY PKWY
City-St-Zip: GLEN ALLEN, VA 23060

Title: TS () Delete
Name: MUNN, JEFF
Address: 4504 SECRET TRAIL COURT
City-St-Zip: SUGAR HILL, GA 30518

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHRIS SEILKOP

PRES

05/21/2002

Electronic Signature of Signing Officer or Director

Date