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

FILED

03 SEP 29 AM 10:02

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N97000004222

1. Entity Name
KEY WEST SOCCER BOOSTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O MICHAEL MCGRAW 1509 LAIRD STREET KEY WEST, FL 33040 US	C/O MICHAEL MCGRAW P.O.BOX 928 KEY WEST, FL 33041 US

CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Four Coconut Drive Suite, Apt. #, etc.	Four Coconut Drive Suite, Apt. #, etc.
City & State: Key West FL	City & State: Key West FL
Zip: 33040 Country: Monroe	Zip: 33040 Country: Monroe

4. FEI Number: 65-0847842 ☐ 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
MCGRAW, MICHAEL 1509 LAIRD STREET KEY WEST, FL 33040	Name: Kevin McChesney Street Address (P.O. Box Number is Not Acceptable): 1221 Johnson Street City: Key West FL Zip Code: 33040

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: Kevin McChesney 9/22/03
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 Initial or Amended UBR

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DV HYATT, TERRI 17021 W STARFISH LANE SUGARLOAF SHORES, FL 33044	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Tammy Saunders Four Coconut Drive Key West, FL 33040	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS MARSHALL, LENNIE 19228 PELICO ROAD SUGARLOAF SHORES, FL 33044	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP MCGRAW, MICHAEL 1509 LAIRD ST. KEY WEST, FL 33040	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	900023401805 09/29/03--01057--003 **61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP MCCHESNEY, KEVIN 1221 JOHNSON ST KEY WEST, FL 33040	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

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: Kevin McChesney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

9/30