

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

**FILED  
May 07, 2002 8:00 am  
Secretary of State**

05-07-2002 90214 001 \*\*\*\*61.25

DOCUMENT # N97000005073(8)

1. Entity Name

New Smyrna Beach Sports Authority, Inc.

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
418 Canal Street

3. Mailing Address  
P. O. Box 428

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
New Smyrna Beach, FL

City & State  
New Smyrna Beach, FL

4. FEI Number  
59-3465959

Applied For  
Not Applicable

Zip  
32168

Country  
Volusia

Zip  
32170

Country  
Volusia

5. Certificate of Status Desired  \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Sid C. Peterson, Jr.

Street Address (P.O. Box Number is Not Acceptable)

418 Canal Street

City New Smyrna Beach FL Zip Code 32168

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

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  
Department of State

10. OFFICERS AND DIRECTORS

TITLE D  
NAME Harvey, Marvin EW, Jr.  
STREET ADDRESS 707 Fairway Drive  
CITY- ST- ZIP New Smyrna Beach, FL 32168

TITLE DPT  
NAME Peterson, Sid C., Jr.  
STREET ADDRESS 131 Cunningham Drive  
CITY- ST- ZIP New Smyrna Beach, FL 32168

TITLE DV  
NAME Caputo, Dominick  
STREET ADDRESS 627 Third Avenue  
CITY- ST- ZIP New Smyrna Beach, FL 32169

TITLE DS  
NAME Lints, Rodney  
STREET ADDRESS 4378 Sea Mist Drive  
CITY- ST- ZIP New Smyrna Beach, FL 32169

TITLE D  
NAME Herbert, Glenn M.  
STREET ADDRESS 4170 Saxon Drive  
CITY- ST- ZIP New Smyrna Beach, FL 32169

TITLE D  
NAME Roe, Terry F.  
STREET ADDRESS 1510 Shadow Pines Drive  
CITY- ST- ZIP New Smyrna Beach, FL 32168

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sid C. Peterson, Jr. 4/29/02 (386)428-2464

Date

Daytime Phone #

CR2E037B (12/01)