

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 23, 2001 08:00 AM
Secretary of State

DOCUMENT # N97000007037

1. Entity Name
 CRESTVIEW LITTLE LEAGUE, INC.

Principal Place of Business PO BOX 1452 CRESTVIEW FL 32539 US	Mailing Address PO BOX 1452 CRESTVIEW FL 32539 US
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2. Principal Place of Business Suite, Apt. #, etc. City & State	3. Mailing Address Suite, Apt. #, etc. City & State
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4. FEI Number
59-3481512

Applied For	
Not Applicable	

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BRUDZYNSKI RICHARD
 4764 MELISSA COVE

 CRESTVIEW FL 32539

7. Name and Address of New Registered Agent

Name
WIRTH CHARLES A

Street Address (P.O. Box Number is Not Acceptable)
 658 E. LEE AVENUE

City
CRESTVIEW FL Zip Code
 32539

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 **CHARLES A WIRTH** DATE **05/23/2001**

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 NAME STREET ADDRESS CITY-ST-ZIP	D LYNCH KIMBERLY 137 STEEPLECHASE DR CRESTVIEW FL 32539	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LYNCH JOHN C 137 STEEPLECHASE DR CRESTVIEW FL 32539	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FAIR SAM 12 COURTNEY LANE CRESTVIEW FL 32539	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WIRTH LISA 658 E. LEE AVNUE CRESTVIEW FL 32539	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WIRTH CHARLES A 658 E. LEE AVENUE CRESTVIEW FL 32539	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRUDZYNSKI RICHARD 4764 MELISSA COVE CRESTVIEW FL 32539	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANHAM GRETCHEN 3013 LA SALLE COURT CRESTVIEW FL 32536	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SAUNDERS MIA M 419 CHRISTOPHER DRIVE CRESTVIEW FL 32536	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD STARR TAMARA 105 VILLACREST DRIVE CRESTVIEW FL 32536	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LEAVINS MICHELLE 252 RIDGELAKE ROAD CRESTVIEW FL 32539	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WIRTH CHARLES A 658 E. LEE AVENUE CRESTVIEW FL 32539	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: **MIA M SAUNDERS** TD **05/23/2001**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #

CR2E037 (11/00)

**MICHAEL CURRIE, D
5902 ROBERTS ROAD**

CRESTVIEW, FL 32539

**COSTELL MCINTOSH, D
5170 WHITEHURST LANE**

CRESTVIEW, FL 32536

**JERRY WILLIS, D
5318 WHITNEY COURT**

CRESTVIEW, FL 32536