## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Feb 28, 2001 8:00 am DOCUMENT # N9800000386 Secretary of State 1. Entity Name 02-28-2001 90051 015 \*\*\*\*61.25 GIFFORD CENTRAL LITTLE LEAGUE, INC. Principal Place of Business Mailing Address 4570 57TH AVE 4570 57TH AVE VERO BEACH FL 32967 VERO BEACH FL 32967 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEL Number 65-0480696 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) IDLETTE, JOE N III 4570 57TH AVE VERO BEACH FL 32967 City Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. CR2E037 (10/00) ☐ Addition TITLE ☐ Delete TITLE Change IDLETTE, JOE III NAME NAME STREET ADDRESS STREET ADDRESS 4570 57TH AVE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 TITLE ☐ Change Addition TITLE ☐ Delete NAME **BROWN, ANTHONY** NAME STREET ADDRESS STREET ADDRESS 4159 57TH CT CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 Addition ☐ Change Delete TITLE TITLE Lambert, Shirley 4541-38th Auc. **BROWN, MARGARET** NAME NAME STREET ADDRESS STREET ADDRESS 4159 57TH CT levo Bch., FL. 32967 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 Addition Delete TITLE ☐ Change TITLE Williams, LinDA 3827-42ND LANE SAUNDERS, SHA NAME NAME STREET ADDRESS STREET ADDRESS 1310 18TH AVE SW Vero Beh., FL. 32967 CITY-ST-ZIP CITY-ST-7IP VERO BEACH FL 32962 SO Change Addition TITLE ☐ Delete TITLE NAME FORBES, THADDEUS NAME STREET ADDRESS STREET ADDRESS 2856 49TH ST CITY-ST-7iP CITY-ST-ZIF VERO BEACH FL 32967 Addition Delete TITLE Change TITLE NAME **NEWMON, CLARENCE** NAME STREET ADDRESS 3975 47TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/20/01

(561) 778-4523

Daytime Phone #

**FILED**