FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 10, 2002 8:00 am Secretary of State DOCUMENT # **N9800000386** 04-10-2002 90444 007 \*\*\*\*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 Mailing Address 432 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0480696 Not Applicable Country U.5 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) IDLETTE, JOE N III 4570 57TH AVE VERO BEACH FL 32967 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. (9/01) PD Delete TITLE PD TITLE Outler, Vincent NAME idlette, joe iii NAME **CR2E037** STREET ADDRESS STREET ADDRESS 4570 57TH AVE ero Beach, Fr. 32967 CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 Delete TITLE **Change** ■ Addition TITLE BROWN, ANTHONY NAME NAME STREET ADDRESS STREET ADDRESS 4159 57TH CT CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 Delete TITLE ☐ Change TITLE LAMBERT, SHIRLEY NAME NAME STREET ADDRESS STREET ADDRESS 4541-38TH AVENUE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 Delete Change - Addition TITLE TITLE SilyiA Reyes, Sirket. WILLIAMS, LINDA NAME STREET ADDRESS 3827-42ND LANE STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32967 CITY-ST-ZIP Delete ✓ Change ☐ Addition TITLE TITLE FORBES, THADDEUS NAME NAME STREET ADDRESS STREET ADDRESS 2856 49TH ST CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 Delete Change TITLE TITLE ☐ Addition SHEPHARD, WILBUR NAME NAME STREET ADDRESS STREET ADDRESS 4029-47TH STREET CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32967 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