

2000 UNIFORM BUSINESS REPORT (UBR)

3/22

FILED

Jul 21, 2000 8:00 am
Secretary of State

03-22-2000 90082 037 ****61.25

DOCUMENT # N98000001373

1. Entity Name

NORTHWEST BROWARD YOUTH FOOTBALL LEAGUE, INC. *P*

Principal Place of Business

Mailing Address

P.O. BOX 935198
MARGATE FL 33093-5198

P.O. BOX 935198
MARGATE FL 33093-5198

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0818607

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

ADAMS, DAWN
4901 SW 10 ST.
MARGATE FL 33068-4049

Name *Belinda Edworthy*

Street Address (P.O. Box Number is Not Acceptable)
6720 NW 6 ST

City *Margate*

FL

Zip Code *33063*

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 *Belinda Edworthy*

Belinda Edworthy 7-12-2000

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME EDWORTHY, DALE
STREET ADDRESS 6720 NW 6 ST
CITY-ST-ZIP MARGATE FL 33063

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DTC
NAME CLANCY, WILLIAM
STREET ADDRESS 5935 NW 72 CT
CITY-ST-ZIP PARKLAND FL 33067

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD
NAME ADAMS, DAWN
STREET ADDRESS 4901 SW 10 ST
CITY-ST-ZIP MARGATE FL 33068

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☒ Addition

*Treasurer
Belinda Edworthy
6720 NW 6 ST
Margate FL 33063*

TITLE SD
NAME GARCIA, SUE
STREET ADDRESS 2130 NW 68 AVE
CITY-ST-ZIP MARGATE FL 33063

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

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: *Belinda Edworthy* 3-20-00 9720

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #