## **2002 UNIFORM BUSINESS REPORT (UBR)**

## May 29, 2002 8:00 am Secretary of State DOCUMENT # N98000001514 1. Entity Name TARPON SPRINGS HIGH SCHOOL SOCCER BOOSTERS, INC. 05-29-2002 90719 024 \*\*\*\*61.25 Principal Place of Business Mailing Address 2875 OAK TREE LANE 2875 OAK TREE LANE PALM HARBOR FL 34684 PALM HARBOR FL 34684 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3575458 Not Applicable Zip Country Country \$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) RAMON CARRION, P.A. 28100 U.S. 19 N. SUITE 502 City CLEARWATER FL 34761 Zip Code 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) 9. Election Campaign Financing - \$5.00 May Be Make Check-Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 1.7 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE TITLE Delete (<u>9</u>04 ☐ Addition Change BERGREN, SANDY DRESCHER, NANCY NAME NAME STREET ADDRESS 2875 OAK TREE LANE STREET ADDRESS 762 BAYSHORE DRIVE CITY-ST-ZIP PALM HARBOR FL 34684 THEPON SPEINGS, FL 34689 CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME Castillejo. Al NAME STREET ADDRESS 1348 ROLLINGWOOD COURT STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS FL 34689 CITY-ST-7IP SD ☐ Delete TITLE SD Change Change ☐ Addition DRESCHER, NANCY-NAME: NAME: LENZ TRACY STREET ADDRESS **762 BAYSHORE DRIVE** STREET ADDRESS 9336 REEN VALLEY ROAD CITY-ST-ZIP TARPON SPRINGS FL 34689 CITY-ST-ZIP PALM HAKBOR 34683 TITLE TD ☐ Delete TITLE ☐ Change ☐ Addition NAME revell, roxanne NAME STREET ADDRESS 1866 WHISPERING WAY STREET ADDRESS CITY-ST-ZIP Tarpon Springs FL 34689 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition FREIERMUTH, JOHN NAME NAME STREET ADDRESS 708 SPARROW AVENUE STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34683 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition Change | NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

FILED

JIRENancy Drescher 5/17/2002 (72794.

changed, or on an attachment with an address, with all other like empowered