2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **N98000002630**

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

City & State

LOSCHETTER, CHRISTOPHER F 752 JOHN CARROLL LANE WEST MELBOURNE FL 32904-7533

FILE NOW:

FEE IS \$61.25

LOSCHETTER, CHRISTOPHER F

WEST MELBOURNE FL 32904-7533

<u>West Melbourne FL 32904-7533</u>

752 JOHN CARROLL LANE

LOSCHETTER, MARY S

FLUGEL, ELLEN F

752 JOHN CARROLL LANE

1465 SYKES CREEK DRIVE

MERRITT ISLAND FL 32953

, Zip

SIGNATURE

10.

TITLE

TITLE

TITLE NAME

TITLE NAME

TITLE

NAME

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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FLORIDA YOUTH SCRATCH BOWLERS TOURNAMENT, INC.

Principal Place of Business Mailing Address 752 JOHN CARROLL LANE 752 JOHN CARROLL LANE WEST MELBOURNE FL 32904-7533 WEST MELBOURNE FL 32904-7533 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State

Country

Name

City

11.

TITLE

NAME

TITLE

NAME STREET ADDRESS

NAME

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STREET ADDRESS

CITY-ST-ZIP

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9. Election Campaign Financing

Trust Fund Contribution.

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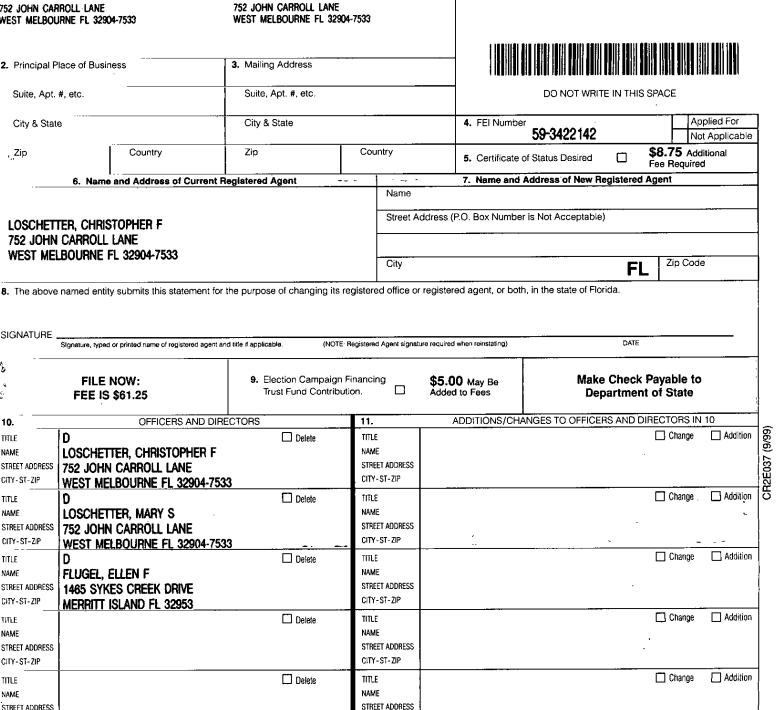
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Zip

FILED Apr 24, 2000 8:00 am Secretary of State

04-24-2000 90104 040 ****61.25



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

SIGNING OFFICER OR DIRECTOR

Daytime Phone #

☐ Addition