

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 29, 2003 8:00 am**  
**Secretary of State**

01-29-2003 90157 012 \*\*\*\*61.25

**DOCUMENT # N98000003086**

1. Entity Name

**BOCA RATON YOUTH ATHLETIC ASSOCIATION, INC.**



Principal Place of Business

**1322 N.W. 14TH COURT  
BOCA RATON FL 33486**

Mailing Address

**1322 N.W. 14TH COURT  
BOCA RATON FL 33486**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0844201**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

~~CAUDIOSI, JOHN~~  
~~3801 NORTH FEDERAL HWY.~~  
~~POMPANO BEACH FL 33064~~

7. Name and Address of New Registered Agent

**ROBERT F. MAHONEY PA**  
Street Address (P.O. Box Number is Not Acceptable)  
**7777 GLADES ROAD, STE 209**  
City **BOCA RATON** FL Zip Code **33434**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**ROBERT F. MAHONEY 1/23/03**

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be Added to Fees**

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	<b>PMD</b>	<input type="checkbox"/> Delete
NAME	<b>TOZZI, ELLEN</b>	
STREET ADDRESS	<b>1322 N.W. 14TH COURT</b>	
CITY-ST-ZIP	<b>BOCA RATON FL 33486</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>LOPATIN, GWEN</b>	
STREET ADDRESS	<b>21100 95 AVE SOUTH</b>	
CITY-ST-ZIP	<b>BOCA RATON FL 33428</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>GAUDIOSI, JOHN</b>	
STREET ADDRESS	<b>3801 NORTH FEDERAL HWY.</b>	
CITY-ST-ZIP	<b>POMPANO BEACH FL 33064</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>ISAACSON, ROBIN</b>	
STREET ADDRESS	<b>20755 EAGLE CREEK COURT</b>	
CITY-ST-ZIP	<b>BOCA RATON FL 33498</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>SILVERMAN, HARRY</b>	
STREET ADDRESS	<b>6211 GREENVIEW TERRACE</b>	
CITY-ST-ZIP	<b>BOCA RATON FL 33433</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>LIEBER, GARY</b>	
STREET ADDRESS	<b>7489 MARTINIQUE BLVD</b>	
CITY-ST-ZIP	<b>BOCA RATON FL 33433</b>	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BILL GAMEZ</b>	
STREET ADDRESS	<b>319 SW 2 ST</b>	
CITY-ST-ZIP	<b>BOCA RATON, FL 33432</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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.

SIGNATURE

**ELLEN TOZZI 1/24/03 581-338-5866**

CR2E037 (10/02)