2000 UNIFORM BUSINESS REPORT (UBR)

FILED

00 JUN -5 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000004106

1. Entity Name

S.W. FLORIDA ALL-STAR CHEERLEADERS, INC.

Principal Place of Business	Mailing Address
4202 SE 2ND AVE CAPE CORALS FL 33904	POST OFFICE BOX 50023 FT. MYERS FL 33994-0023

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4204 SE 2nd AVE Suite, Apt. #, etc.	P.O. Box 61564 Suite, Apt. #, etc.
City & State: Cape Coral, FL Zip: 33904 Country: Lee	City & State: Ft. Myers, FL Zip: 33906-1564 Country: Lee

4. FEI Number: 65-0875856 ☐ 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
GLATZ, CONNIE 4204 SE 2ND AVE CAPE CORAL FL 33904	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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: Connie Glatz
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DP GLATZ, CONNIE P.O. BOX 50023 FT MYERS FL 33994-0023	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 100003310081 -06/30/00--01014--013 *****70.00 *****70.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV LEWIS, MARYBETH 1738 SE 29TH LN CAPE CORAL FL 33904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS BRIGGS, RHONDA 16970 LAURETHN CT N FT MYERS FL 33917	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Jean Montgomery 1002 Edison Ave Lehigh Acres, FL 33936 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT HAMLIN, LAURA 144 SE 17 TERR CAPE CORAL FL 33994	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition TS
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E032(10/99)

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: Connie Glatz Connie Glatz 5-30-00 941-549-3257

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #