## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # N99000002161**

1. Entity Name

PALM BEACH YOUTH BASKETBALL TRAVEL LEAGUE, INC.



FILED Apr 26, 2004 08:00 AM Secretary of State

Principal Place of Business

9868 SANDAL FOOT BLVD. Suite #122 Boca Raton, FL 33428

TEQUESTA, FL 33469

SIGNATURE:

Mailing Address

9868 SANDAL FOOT BLVD. Suite #122 Boca Raton, FL 33428



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

04142004 No Chg-NP

CR2E037 (10/03)

4. FEI Number 65-1052155

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

MAGGIO, ART 300 FAIRWAY DRIVE NORTH

## DO NOT WRITE IN THIS SPACE

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					
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financ Trust Fund Contribution	cing	\$5.00 May Be Added to Fees	U00000128066 04/26/04-60023-006 61.25
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP DOYLE, MIKE 9868 SANDAL FOOT BLVD. #122 BOCA RATON, FL 33428				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BRADFORD, LANCE 9868 SANDAL FOOT BLVD. #122 BOCA RATON, FL 33428				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAGGIO, ART 9868 SANDAL FOOT BLVD. #122 BOCA RATON, FL 33428		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BLEECHER, ALLAN 9868 SANDAL FOOT BLVD. #122 BOCA RATON, FL 33428		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MCCARTHY, ELAINE 9868 SANDAL FOOT BLVD. #122 BOCA RATON, FL_33428				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MINTZ, HOWARD 9868 SANDAL FOOT BLVD. #122 BOCA RATON, FL 33428				
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 are drate and that my argusture 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.					

MAME OF SIGNING OFFICER OR DIRECTOR