

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

FILED
May 29, 2003 8:00 am
Secretary of State

05-29-2003 90137 026 ****61.25

DOCUMENT # N99000003700

1. Entity Name

EMERALD COAST YOUTH SPORTS ASSOCIATION CORPORATION



Principal Place of Business

**6021 CURTIS ROAD
PACE FL 32571**

Mailing Address

**6021 CURTIS ROAD
PACE FL 32571**

2. Principal Place of Business

3. Mailing Address

1229 TIFFANY DRIVE

P.O. BOX 9095

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

PENSACOLA, FLORIDA

City & State

PENSACOLA, FLORIDA

4. FEI Number **59-3683298**

Applied For

Not Applicable

Zip

32514

Country

ESCAMBIA

Zip

32513

Country

ESCAMBIA

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

6. Name and Address of Current Registered Agent

**GRIFFITH, DENNIS
707 EDEN LANE RT 4
PENSACOLA FL 32533**

7. Name and Address of New Registered Agent

Name **GRIFFITH, DENNIS**

Street Address (P.O. Box Number is Not Acceptable)

1229 TIFFANY DR.

City

PENSACOLA

FL

Zip Code

32514

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 **DENNIS GRIFFITH (PRESIDENT)**

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

(NOTE: Registered Agent signature required when installing)

5/20/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **TD** ☒ Delete
NAME **BAXLEY, CHARLES**
STREET ADDRESS **6021 CURTIS ROAD**
CITY-ST-ZIP **PACE FL 32571**

TITLE **PD** ☐ Delete
NAME **GRIFFITH, DENNIS**
STREET ADDRESS **707 EDEN LANE RT 4**
CITY-ST-ZIP **PENSACOLA FL 32533**

TITLE **VD** ☐ Delete
NAME **BALDWIN, DOUG**
STREET ADDRESS **711 N. HAYNES STREET**
CITY-ST-ZIP **PENSACOLA FL 32501**

TITLE **SD** ☒ Delete
NAME **VAN CAMP, JEFF**
STREET ADDRESS **3912 TIGER POINT BLVD**
CITY-ST-ZIP **GULF BREEZE FL 32561**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TD** ☐ Change ☒ Addition
NAME **JOHN ALLBRITON**
STREET ADDRESS **322 WEST CERVANTES STREET**
CITY-ST-ZIP **PENSACOLA, FL 32501**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Change ☐ Addition
NAME **PATTY WOODSON**
STREET ADDRESS **2814 REESE LANE**
CITY-ST-ZIP **CANTONMENT, FL 32533**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: **DOUGLAS D. BALDWIN (VICE-PRESIDENT)**

5/20/03

**(850)
932-3129**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)