

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 13, 2001 8:00 am
Secretary of State

04-13-2001 90007 042 ****61.25

0033271

DOCUMENT # N99000004013

1. Entity Name

BONITA SPRINGS YOUTH SOCCER ASSOCIATION, INC.

Principal Place of Business

24721 BAYBEAN COURT
BONITA SPRINGS FL 34134

Mailing Address

24721 BAYBEAN COURT
BONITA SPRINGS FL 34134

110047403



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3585635

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KELLY, DANIEL
24721 BAYBEAN COURT
BONITA SPRINGS FL 34134

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

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 PD ☐ Delete
NAME KELLY, DANIEL
STREET ADDRESS 24721 BAYBEAN COURT
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE VPD ☐ Delete
NAME VANPAGE, MITCHELL
STREET ADDRESS 11802 FOREST MERE DRIVE
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE SD ☐ Delete
NAME KELLY, SHEILA
STREET ADDRESS 24721 BAYBEAN COURT
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE TD ☒ Delete
NAME KASKIE, STEPHEN
STREET ADDRESS 4061 BONITA BEACH ROAD, SUITE 103
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE D ☒ Delete
NAME THOMPSON, TIM
STREET ADDRESS 27601 MASTERTON AVENUE
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE D ☒ Delete
NAME GRESS, MARK
STREET ADDRESS 25671 CORVINE LANE
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE CHRIS WATERHOUSE ☐ Change ☒ Addition

NAME DIRECTOR
STREET ADDRESS 25608 STILLWELL PKWY
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE JOHN BERGQUIST ☐ Change ☒ Addition

NAME DIRECTOR
STREET ADDRESS 9921 EL GRECO CIRCLE
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE TAMMIE BUMPUS ☐ Change ☒ Addition

NAME REGISTRAR
STREET ADDRESS 27295 RUE DE PAIX
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE EVELYN HOOVER ☐ Change ☐ Addition

NAME TREASURER
STREET ADDRESS 27307 BARBAROSSA ST
CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE CARIE CERVANTES ☐ Change ☒ Addition

NAME DIRECTOR
STREET ADDRESS 20670 CAPE VERDE LANE
CITY-ST-ZIP BONITA SPRINGS FL 34135

☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/01 941-495-1160
Date Daytime Phone #

CR2E037(10/00)