

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005028

1. Entity Name

QUINCY FOOTBALL OFFICIALS ASSOCIATION, INC.

Principal Place of Business

1766 TOLAR-WHITE ROAD  
QUINCY FL 32351

Mailing Address

P.O. BOX 305  
QUINCY FL 32353

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3136090

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

MCPHAUL, DAVID  
1766 TOLAR-WHITE ROAD  
QUINCY FL 32351

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 D/P  
NAME MCPHAUL, DAVID  
STREET ADDRESS 1766 TOLAR-WHITE RD  
CITY-ST-ZIP QUINCY FL 32351 ☐ Delete

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

TITLE D/V  
NAME STANLEY, GEORGE  
STREET ADDRESS 1302 SMOKE RISE LANE  
CITY-ST-ZIP TALLAHASSEE FL 32311 ☐ Delete

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

TITLE DST  
NAME WHITMORE, LARRY  
STREET ADDRESS 1636 TOLAR-WHITE RD  
CITY-ST-ZIP QUINCY FL 32351 ☐ Delete

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

TITLE D  
NAME CROOK, RICHARD  
STREET ADDRESS PO BOX 2531  
CITY-ST-ZIP HAVANA FL 32323 ☐ Delete

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

TITLE D  
NAME SPEIR, TODD  
STREET ADDRESS 3057 HARPERS FERRY DR  
CITY-ST-ZIP TALLAHASSEE FL 32308 ☒ Delete

TITLE D  
NAME ALFONZA TUTSON  
STREET ADDRESS 2000 N. MERIDIAN RD APT 234  
CITY-ST-ZIP TALLAHASSEE, FL 32303 ☒ Addition

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Change ☐ Addition  
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: LARRY WHITMORE *Larry Whitmore*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-02 850-442-6105

Date

Daytime Phone #

CR2E037 (9/01)