

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

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90935 027 ****61.25

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DOCUMENT # N99000007583

1. Entity Name

BRUSA FUTEBOL CLUB, INC.



Principal Place of Business

**7041 GRAND NATIONAL DR #234
ORLANDO FL 32819**

Mailing Address

**P.O. BOX 691732
ORLANDO FL 32869
US**

2. Principal Place of Business

7061 GRAND NATIONAL DR

3. Mailing Address

Suite, Apt. #, etc.

142

City & State

ORLANDO, FL

City & State

Zip

32819

Country

US

Zip

Country

4. FEI Number **59-3338124**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**GONCALVES, JOSE T.
7041 GRAND NATIONAL DR #234
ORLANDO FL 32819**

7. Name and Address of New Registered Agent

Name **Jose Thadeu Goncalves**

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

7061 GRAND NATIONAL DR # 142

City **ORLANDO**

FL

Zip Code **32819**

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

04/10/03

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 **PD** ☐ Delete
NAME **GONCALVES, JOSE T**
STREET ADDRESS **7041 GRAND NATIONAL DR #234**
CITY-ST-ZIP **ORLANDO FL 32819**

TITLE **VPD** ☐ Delete
NAME **HERTELL, KEITH**
STREET ADDRESS **241 EAST DUDLEY AVENUE**
CITY-ST-ZIP **WESTFIELD NJ 07090**

TITLE **VPD** ☐ Delete
NAME **DEAN, TURNER**
STREET ADDRESS **3430 OLEANDER**
CITY-ST-ZIP **GULF STREAM FL 33483**

TITLE **STD** ☐ Delete
NAME **EMLING, CHARLES A IV**
STREET ADDRESS **605 CHESAPEAKE DRIVE**
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 ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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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:

SIGNATURE OF Jose Thadeu Goncalves

04/10/03

(407) 352-5588

CR2E037 (10/02)