

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000025017

1. Entity Name

SPORTS FOR FUN, INC.

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90106 035 ***150.00

Principal Place of Business

4760 N. CONGRESS AVE
 LANTANA FL 33462

Mailing Address

1701 W. HILLSBORO BLVD
 #410
 DEERFIELD BCH FL 33442-1564

2. Principal Place of Business

777 Yamato Road

3. Mailing Address

777 Yamato Road

Suite, Apt. #, etc.

#330

Suite, Apt. #, etc.

#330

City & State

Boca Raton, FL

City & State

Boca Raton, FL

4. FEI Number

65-0735863

Applied For

Not Applicable

Zip

33431

Country

USA

Zip

33431

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MENKHAUS, DAVID J
 4800 N FEDERAL HWY
 SUITE 210-A
 BOCA RATON FL 33431

7. Name and Address of New Registered Agent

Name

Myrick, Kim

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

777 Yamato Road

#330

City

Boca Raton,

FL

Zip Code
 33431

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

Kim Myrick (Secretary/Treasurer)

4/28/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

| | | |
|----------------|-------------------------------|---------------------------------|
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | BOSCH, JULIE | |
| STREET ADDRESS | 1701 W. HILLSBORO BLVD., #401 | |
| CITY-ST-ZIP | DEERFIELD BCH FL 33442 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | MYRICK, KIM | |
| STREET ADDRESS | 1701 W. HILLSBORO BLVD., #401 | |
| CITY-ST-ZIP | DEERFIELD BCH FL 33442 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | LECHNER, BRIAN | |
| STREET ADDRESS | 1701 W. HILLSBORO BLVD., #401 | |
| CITY-ST-ZIP | DEERFIELD BCH FL 33442 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|---------------------------|--|
| TITLE | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Bosch, Julie (Pres) | |
| STREET ADDRESS | 6470 Pinyon Pine Court | |
| CITY-ST-ZIP | Lantana, FL 33462 | |
| TITLE | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Myrick, Kim (Sec/Tres) | |
| STREET ADDRESS | 1664 Flagler Manor Circle | |
| CITY-ST-ZIP | West Palm Beach, FL 33411 | |
| TITLE | | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Lechner, Brian (V.P.) | |
| STREET ADDRESS | 360 SE Mizner Blvd. #1509 | |
| CITY-ST-ZIP | Boca Raton, FL 33432 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kim Myrick Kim Myrick

4/28/00

561-893-0163

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)