

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N12481

FILED  
Apr 28, 2003  
Secretary of State

Entity Name: EAST CITRUS YOUTH FOOTBALL CONFERENCE, INCORPORATED

**Current Principal Place of Business:**

P.O. BOX 2933  
INVERNESS, FL 326512933

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2933  
INVERNESS, FL 344512933 US

**New Mailing Address:**

FEI Number: 59-3087183      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PAQUETTE, WAYNE  
9918 EAST ST. REGIS CT.  
INVERNESS, FL 34450

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BENDER, SCOTT  
Address: 7316 E GOSPEL ISLAND RD  
City-St-Zip: INVERNESS, FL 34450

Title: S ( ) Delete  
Name: IGLESIAS'S, HENRY  
Address: 6304 EAST URBAN LANE  
City-St-Zip: FLORAL CITY, FL 34436

Title: C (X) Delete  
Name: BYWATER, DIANE  
Address: 555 NORTH CORBIN ST.  
City-St-Zip: INVERNESS, FL 34453

Title: VP (X) Delete  
Name: BUDD, LAMAR  
Address: 9257 EAST SMOKETREE PLACE  
City-St-Zip: INVERNESS, FL 34450

Title: T ( ) Delete  
Name: PAQUETTE, WAYNE  
Address: 9918 EAST ST REGIS CT.  
City-St-Zip: INVERNESS, FL 34450

Title: T ( ) Delete  
Name: PAQUETTE, WAYNE  
Address: 9918 EAST ST. REGIS ST.  
City-St-Zip: INVERNESS, FL 34450

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: BENDER, SCOTT  
Address: 6046 E ONEIDA ST  
City-St-Zip: INVERNESS, FL 34452

Title: C (X) Change ( ) Addition  
Name: TOBIN, JEFF  
Address: 8341 E FAIRWAY LOOP  
City-St-Zip: INVERNESS, FL 34430

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WAYNE PAQUETTE

T

04/28/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date