

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726551

FILED
Apr 07, 2006
Secretary of State

Entity Name: PASCO POLICE ATHLETIC LEAGUE, INC.

Current Principal Place of Business:

8700 CITIZENS DR
NEW PORT RICHEY, FL 34654

New Principal Place of Business:

Current Mailing Address:

8700 CITIZENS DR
NEW PORT RICHEY, FL 34654

New Mailing Address:

FEI Number: 59-1859886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, R.L. BOB
8700 CITIZEN DRIVE
NEW PORT RICHEY, FL 34654 US

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: TD () Delete
Name: KARY, CHRISTINE
Address: 8007 HATHAWAY DR
City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: PD () Delete
Name: RYAN, BOB
Address: 12020 GENTER DR
City-St-Zip: SPRING HILL, FL 34609 US

Title: VPD () Delete
Name: DEARSMAN, DOLLIE
Address: 9435 WEEPING WILLOW LN
City-St-Zip: PORT RICHEY, FL 34668

Title: VPD (X) Delete
Name: KLEIN, JAMES
Address: 8910 CESSNA CR
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: SD () Delete
Name: BRITT, APRIL
Address: 10129 BRIAR CIRCLE
City-St-Zip: HUDSON, FL 34667

Title: ED () Delete
Name: WHITE, R.L. BOB
Address: 8700 CITIZENS DR.
City-St-Zip: NEW PORT RICHEY, FL 34654

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: HOBBS, GLENN
Address: 13634 PEACE BLVD
City-St-Zip: SPRING HILL, FL 34610 US

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 Chapter 119, 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: CHRISTINE KARY

TD

04/07/2006

Electronic Signature of Signing Officer or Director

Date