## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 726551**

Apr 20, 2009 Secretary of State

Entity Name: PASCO POLICE ATHLETIC LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

8700 CITIZENS DR

NEW PORT RICHEY, FL 34654

Current Mailing Address: New Mailing Address:

PO BOX 237 PO BOX 237

NEW PORT RICHEY, FL 34673 PORT RICHEY, FL 34673

FEI Number: 59-1859886 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

WHITE, R.L. BOB 8700 CITIZEN DRIVE

NEW PORT RICHEY, FL 34654 US

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: ED () Delete Name: BURKE, MARY ANNE

Address: 8700 CITIZENS DR

City-St-Zip: NEW PORT RICHEY, FL 34654 US

Title: PD ( ) Delete Name: GARDINER, MARK

Address: 7447 THUNDERHEAD STREET

City-St-Zip: WESLEY CHAPEL, FL 33554 US

Title: SD () Delete
Name: AINSWORTH, DEANN
Address: 5240 KING STREET

Address: 5310 KING STREET
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: TD (X) Delete Name: MYERS, NENA

Address: MYERS, NENA
Address: 12230 CITATION RD
City-St-Zip: SPRING HILL, FL 34610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition

Name: GARDINER, MARK
Address: 7447 THUNDERHEAD STREET

City-St-Zip: WESLEY CHAPEL, FL 33554 US

Title: SD (X) Change ( ) Addition

Name: AINSWORTH, DEANN Address: 5310 KING STREET

Address. SSTUKING STREET

City-St-Zip: ZEPHYRHILLS, FL 33542 US

Title: TD (X) Change ( ) Addition

Name: MYERS, NENA
Address: 12230 CITATION ROAD
City-St-Zip: SPRING HILL, FL 34610

Title: ( ) Change ( ) Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: NENA MYERS TD 04/20/2009