

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2006 8:00 am**  
**Secretary of State**

05-01-2006 90458 025 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                           |                                                                                            |                                                                                                                                                                                                        |                                                                                   |                                                                              |
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| <b>DOCUMENT # N00000002913</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                           |                                                                                            |                                                                                                                                                                                                        |  |                                                                              |
| <b>1. Entity Name</b><br>BRANDON BRONCOS YOUTH FOOTBALL INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                           |                                                                                            |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| <b>Principal Place of Business</b><br>POST OFFICE BOX 2001<br>BRANDON, FL 33509                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                           |                                                                                            | <b>Mailing Address</b><br>POST OFFICE BOX 2001<br>BRANDON, FL 33509                                                                                                                                    |                                                                                   |                                                                              |
| <b>2. Principal Place of Business</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                           | <b>3. Mailing Address</b>                                                                  |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                           | Suite, Apt. #, etc.                                                                        |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                           | City & State                                                                               |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Country                                                                                   | Zip                                                                                        | Country                                                                                                                                                                                                | <b>4. FEI Number</b><br>NOT APPLICABLE                                            |                                                                              |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                           |                                                                                            |                                                                                                                                                                                                        | <b>\$8.75 Additional Fee Required</b>                                             |                                                                              |
| <b>6. Name and Address of Current Registered Agent</b><br><br>CARDWELL, RANDALL<br>1043 AXLEWOOD CIRCLE<br>BRANDON, FL 33511                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                           |                                                                                            | <b>7. Name and Address of New Registered Agent</b><br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="text-align: right;"> <b>FL</b> Zip Code                 </div> |                                                                                   |                                                                              |
| <b>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.</b>                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                           |                                                                                            |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| <b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when resigning) <span style="float: right;"><b>DATE</b> _____</span>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                           |                                                                                            |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| <b>Filing Fee is \$61.25</b><br><b>Due by May 1, 2006</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                           | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                                                                                                                                        | <b>\$5.00 May Be Added to Fees</b>                                                |                                                                              |
| <b>Make check payable to Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                           |                                                                                            |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                           |                                                                                            | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                           |                                                                                   |                                                                              |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>D</b><br>CARDWELL, RANDALL<br>1043 AXLEWOOD CIRCLE<br>BRANDON, FL 33511                | <input type="checkbox"/> Delete                                                            |                                                                                                                                                                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>VD</b><br>FIGUEROA, MILTON<br>14203 GRUBBS LANE<br>RIVERVIEW, FL 33569                 | <input type="checkbox"/> Delete                                                            |                                                                                                                                                                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>SD</b><br>CARDONE, SHARON L<br>5809 LEGACY CRESCENT PLACE, #302<br>RIVERVIEW, FL 33569 | <input checked="" type="checkbox"/> Delete                                                 |                                                                                                                                                                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>TD</b><br>KUHLMEYER, VICKIE L<br>1412 MOSS LADEN CT<br>BRANDON, FL 33511               | <input type="checkbox"/> Delete                                                            |                                                                                                                                                                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                           | <input type="checkbox"/> Delete                                                            |                                                                                                                                                                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                           | <input type="checkbox"/> Delete                                                            |                                                                                                                                                                                                        | <b>TITLE</b><br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                         | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.</b> |                                                                                           |                                                                                            |                                                                                                                                                                                                        |                                                                                   |                                                                              |
| <b>SIGNATURE:</b> <u>Vickie L. Kuhlmeier</u> <b>VICKIE L. KUHLMEYER</b> <u>4/31/06</u> <u>813-541-5030</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                           |                                                                                            |                                                                                                                                                                                                        |                                                                                   |                                                                              |