

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # N00000002913

1. Entity Name
BRANDON BRONCOS YOUTH FOOTBALL INC.



Principal Place of Business
**POST OFFICE BOX 2001
BRANDON, FL 33509**

Mailing Address
**POST OFFICE BOX 2001
BRANDON, FL 33509**



04262007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CARDWELL, RANDALL
1043 AXLEWOOD CIRCLE
BRANDON, FL 33511**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARDWELL, RANDALL 1043 AXLEWOOD CIRCLE BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD FIGUEROA, MILTON 14203 GRUBBS LANE RIVERVIEW, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OXLEY, JEANNIE 1203 LORNEWOOD DR VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KUHLMEYER, VICKIE L 1412 MOSS LADEN CT BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/16/07-80082-004 61.25

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE:

Vickie L. Kuhlmeier **VICKIE L. KUHLMEYER**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/07
Date

813 546-5030
Daytime Phone #