2003 NOT-FOR-PROFIT CORPORATION

## **FILED** May 08, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR)** Secretary of State **DOCUMENT # N31430** 05-08-2003 90169 039 \*\*\*\*61.25 AVON PARK YOUTH FOOTBALL, INC. Mailing Address Principal Place of Business P.O. BOX 218 P.O. BOX 218 AVON PARK FL 33825 **AVON PARK FL 33825** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc.: ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-2381111 Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PEARLMAN, DOREEN J. 2534 W RAVEN RD AVON PARK FL 33825 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 3-13-03 SIGNATUR (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. Delete TITLE ☐ Addition TITLE Jim Prevatt PEARLMAN, DOREEN NAME 200 E. Vid Bambing Kange Ad. 2534 W. RAVEN RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **AVON PARK FL 33825** CITY-ST-ZIP 9 WN PAIL FL 33825 reside TITLE TITI F ☐ Delete onn's Usina USIMA, CHRISTPHER T NAME NAME 821 Lake Angelo Drive STREET ADDRESS 2719 W WINDSOR STREET ADDRESS Avon PARK, F1. 33825 CITY-ST-ZIP CITY-ST-7IP AVON PARK FL 33825 Metonie Jackson Minne Delete TITLE -TITLE JIMENEZ, RAUL NAME NAME 2467 W. Raven Kd STREET ADDRESS 1860 N BERKELEY RD STREET ADDRESS Avon Park FL 33825 CITY-ST-ZIP CITY-ST-ZIP AVON PARK FL 33825 Delete TITLE ☐ Addition TITLE Tracy MAC CORNACK MACCORNOCK, TRACY NAME NAME 6068. Angelo LKRd. STREET ADDRESS 606 S ANGELO LK RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **AVON PARK FL 33825** Avon Parkifi **BMT** Delete TITLE Addition TITLE lelanie Bivens COWD, MIAHAEL NAME NAME 2917 Grouper DR. STREET ADDRESS **42 WAINWRIGHT WAY** STREET ADDRESS CITY-ST-ZIP AVON PARK FL 33825 CITY-ST-7IP Sebring, <u>f/3387</u>5 Delete Addition TITLE TITLE BORCHAS, SHEENA NAME NAME

12. I hereby certify that the information supplied with this filing does not qualify 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 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

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

2445 W HARDLAND RD

AVON PARK FL 33825

STREET ADDRESS

CITY-ST-71P

(863) 453-5777