


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2004 08:00 AM
Secretary of State

DOCUMENT # N43519 1. Entity Name TAMARAC ATHLETIC FEDERATION, INC.	
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Principal Place of Business 7501 N. UNIVERSITY DR. TAMARAC, FL 33321	Mailing Address P.O. BOX 26806 FT. LAUDERDALE, FL 33320
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02042004 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEHMBECK, JEANNIE
 8009 NW 72 AVE
 TANARAC, FL 33321

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: Jeannie Schmebeck (NOTE: Registered Agent signature required when reinstating) DATE: 4/2/04

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000108280
 04/09/04-80049-007 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LEHMBECK, JEANIE 8009 NW 72 AVE TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MACDONALD, KEVIN 8111 NW 73 AVE TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PENSON, CAROL 7913 NW 71 AVE TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MCDONALD, KEVIN 8111 NW 73 AVENUE TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BOOS, ROBERT 10952 NW 21ST CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 817, 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: Jeannie Schmebeck DATE: 4/2/04 DAYTIME PHONE #: 954-257-0326