

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44715

FILED
Jan 11, 2006
Secretary of State

Entity Name: NATIONAL COUNCIL OF YOUTH SPORTS, INC.

Current Principal Place of Business:

7185 SE SEAGATE LN
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

7185 SE SEAGATE LN
STUART, FL 34997 US

New Mailing Address:

FEI Number: 62-1339470 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALLY CUNNINGHAM
7185 SE SEAGATE LANE
STUART, FL 34997 US

Name and Address of New Registered Agent:

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: DT () Delete
Name: LANDOLT, LARRY
Address: 301 GROVE ST
City-St-Zip: LYNCHBURG, VA 24501

Title: D () Delete
Name: WALKER, CLAY
Address: 2021 L STREET NW
City-St-Zip: WASHINGTON, DC 20036

Title: VD () Delete
Name: BUTLER, JON
Address: 586 MIDDLETOWN BLVD STE C-100
City-St-Zip: LANGHORNE, PA

Title: D () Delete
Name: MCCONNELL, ALICIA
Address: ONE OLYMPIC PLAZA
City-St-Zip: COLORADO SPRINGS, CO 80909

Title: DS () Delete
Name: MARSHALL, PAM
Address: PO BOX 10000 C/O WDW RESORTS
City-St-Zip: LAKE BUENA VISTA, FL 328301000

Title: P () Delete
Name: RUTLEDGE, WANDA
Address: 2620 WHITEHORSE HAMILTON SQ RD
City-St-Zip: HAMILTON SQUARE, NJ 08690

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CUNNINGHAM, SALLY
Address: 7185 SE SEAGATE LANE
City-St-Zip: STUART, FL 34997

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
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Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SALLY S. CUNNINGHAM

D

01/11/2006

Electronic Signature of Signing Officer or Director

_____ Date