2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002094

FILED Mar 23, 2006 Secretary of State

Entity Name: BOCA FLAG FOOTBALL AND CHEERLEADING, CORP.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 970423 P.O. BOX 970271

BOCA RATON, FL 33497 BOCA RATON, FL 33497

Current Mailing Address: New Mailing Address:

P.O. BOX 970423 P.O. BOX 970271

BOCA RATON, FL 33497 BOCA RATON, FL 33497

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROMANO, JAY R 433 PLAZA REAL SUITE 275 BOCA RATON, FL 33432 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 ROMANO, SALVATORE
 Name:
 ROMANO, SALVATORE

 Address:
 P.O. BOX 970423
 Address:
 P.O. BOX 970271

 City-St-Zip:
 BOCA RATON, FL 33497
 City-St-Zip:
 BOCA RATON, FL 33497

Title: D () Delete Title: D (X) Change () Addition Name: DEMOSS, MARK Name: DEMOSS, MARK

 Name:
 DEMOSS, MARK
 Name:
 DEMOSS, MARK

 Address:
 P.O. BOX 970423
 Address:
 P.O. BOX 970271

 City-St-Zip:
 BOCA RATON, FL 33497
 City-St-Zip:
 BOCA RATON, FL 33497

Title: D () Delete Title: D (X) Change () Addition Name: BARRERA, MIKE D (X) Change () Addition

 Name:
 BARRERA, MIKE
 Name:
 BARRERA, MIKE

 Address:
 P.O. BOX 970423
 Address:
 P.O. BOX 970271

 City-St-Zip:
 BOCA RATON, FL 33497
 City-St-Zip:
 BOCA RATON, FL 33497

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 BARRERA, MISSY
 Name:
 BARRERA, MISSY

 Address:
 P.O. BOX 970423
 Address:
 P.O. BOX 970271

 City-St-Zip:
 BOCA RATON, FL 33497
 City-St-Zip:
 BOCA RATON, FL 33497

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: SALVATORE ROMANO D 03/23/2006