

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000001561

**FILED**  
**Apr 30, 2019**  
**Secretary of State**  
**5807529934CC**

**Entity Name:** EVER YOUTH SPORTS FOUNDATION,INC.

**Current Principal Place of Business:**

12472 LAKE UNDERHILL RD.  
SUITE 346  
ORLANDO, FL 32828

**Current Mailing Address:**

12472 LAKE UNDERHILL RD.  
SUITE 346  
ORLANDO, FL 32828 US

**FEI Number:** 20-4315731

**Certificate of Status Desired:** Yes

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

MCRAE, ADRIAN G  
1102 LANDALE COURT  
ORLANDO, FL 32828 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

**Officer/Director Detail :**

Title            PRES  
Name            MCRAE, ADRIAN G  
Address        1102 LANDALE COURT  
City-State-Zip: ORLANDO FL 32828

Title            EXECUTIVE SECRETARY  
Name            SHIELDS, DARLENE  
Address        14855 HAWKSMOOR RUN CIRCLE  
City-State-Zip: ORLANDO FL 32828

Title            TRES  
Name            MCRAE, DEBORAH  
Address        1102 LANDALE COURT  
City-State-Zip: ORLANDO FL 32828

Title            VICE-PRESIDENT  
Name            MITCHELL, DESIREE  
Address        13012 CRYSTAL COVE DRIVE  
City-State-Zip: ORLANDO FL 32828

Title            MEDIA DIRECTOR  
Name            VALES, RAYMOND  
Address        9162 HASTINGS BEACH BLVD  
City-State-Zip: ORLANDO FL 32829

Title            FUNDRAISER COORDINATOR  
Name            SHIELDS, DENESSA  
Address        2218 SAW PALMETTO LANE (APT 114)  
City-State-Zip: ORLANDO FL 32828

Title            EDUCATION COORDINATOR  
Name            BLAIR, JULAINE  
Address        12472 LAKE UNDERHILL RD.  
                 SUITE 346  
City-State-Zip: ORLANDO FL 32828

Title            SECRETARY  
Name            SHIELDS, JANE  
Address        12472 LAKE UNDERHILL RD.  
                 SUITE 346  
City-State-Zip: ORLANDO FL 32828

*I hereby 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 all other like empowered.*

**SIGNATURE:** ADRIAN MCRAE

**PRESIDENT**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date