

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000000212

**Entity Name:** WEST BOYNTON FOOTBALL LEAGUE INC.

**Current Principal Place of Business:**

351 N. CONGRESS AVE.  
#195  
BOYNTON BEACH, FL 33426

**Current Mailing Address:**

351 N. CONGRESS AVE.  
#195  
BOYNTON BEACH, FL 33426

**FEI Number:** 61-1523239

**Certificate of Status Desired:** Yes

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

SCHUMACHER, CARRIE C  
9981 COBBLESTONE CREEK DR.  
BOYNTON BEACH, FL 33472 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            TREASURER  
Name            EBERT, SHWAN  
Address        4635 PINEMORE LANE  
City-State-Zip: LAKE WORTH FL 33463

Title            VP  
Name            WELZ, ANDREW  
Address        5319 ISLAND GYPSY DR.  
City-State-Zip: GREENACRES FL 33463

Title            PRESIDENT  
Name            STAATS, LENNY  
Address        6351 BARTON CREEK CIRCLE  
City-State-Zip: LAKE WORTH FL 33436

Title            S  
Name            SCHUMACHER, CARRIE C  
Address        9981 COBBLESTONE CREEK DR.  
City-State-Zip: BOYNTON BEACH FL 33472

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:** CARRIE C. SCHUMACHER

**SECRETARY**

**03/13/2014**

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

\_\_\_\_\_  
Date