2008 NOT-FOR-PROFIT CORPORATION

## **FILED** Mar 20, 2008 8:00 am

| ANNUAL REPORT  |  |   |  |  |  |  | Secretary of State  |  |              |  |   |
|--|--|---|--|--|--|--|---|--|--------------|--|---|
| 1. Entity Nam  | MENT # 713264<br>PRAL JUNIOR FOOTBALL  | ASSOCI                                  | ATION, INC   | <u></u>  |  |  | (   | )3-20-2008 9   |              |  |   |
| P 0-B0X 150207 ·   |  |   | Mailing Address<br>627 SE 32ND ST<br>CAPE CORAL, FL 33904      |  |  | 50000108   |   |  |              |  |   |
|  | tace of Business - No P.O. Box #   |   | ng Address   | <b>Money</b>   |  |  |   |  |              |  |   |
| 610 Del Prado Blvd. Suite, Apt. #, etc. A  |  | 906 SE 32nd Terrace Suite, Apt. #, etc. |  |  |  | 01072008   | Chg-NP  | CR2E0  | 37 (12/06)   |  |   |
| City & State Cape Coral, Florida   |  | City & State Cape Coral, Florida        |  |  | da   |  | 4. FEI Number 59-1961   |  |              | <del>-</del>   | pplied For<br>ot Applicable                   |
| Zip<br>33915   | Country<br>USA   | 3390                                    | )4   | USA<br>USA   | untry  | •  | 5. Certificate of   | f Status Desired   | X            | \$8.75 Ade   | ditlonal                                      |
|  | 6. Name and Address of Current   | Registered                              | Agent  |  |  |  | 7. Name and   | Address of New I   | Registered   | Agent  |   |
| SERAVELI<br>627 SE 32  | LO, RALPH  |   |  |  |  |  | r, Jeremy   | is Not Acceptable  | la)          |  |   |
|  | RAL, FL 33904  |   |  |  | 9  | 06 S   | 32nd Te   | rrace  | ie)          |  |   |
| 5,4,250  | 2  |   |  |  |  |  |   |  |              |  |   |
| i  |  |   |  |  |  |  | Coral, Fl   |  | Fl           | _ ,  |   |
| 8. The above   | named entity submits this statement for<br>ions of registered agent.   | or the purpor                           | se of changing it  | s register   | ed office or   | r register   | ed agent, or both   | , in the State of Fi   | lorida. 1 am | n familiar with,   | , and accept                                  |
| SIGNATURE  |  | Te                                      | cable. (NC   | TE: Registere  | ~ Pr   | r F X  | e - \}<br>I when reinstating)   |  | O3           | 110/0  | <u> </u>                                      |
| SIGNATURE .  | 1) Tuy   | Te end title if applic                  | 9. Election Ca<br>Trust Fund                                   | ampaign F  | Financing  | C s ich  | \$5.00 May Be Added to Fees   |  |              | //O /O   | to: 🥳   |
| SIGNATURE .  | printed in the of registered agent   |   | 9. Election Ca   | ampaign F  | Financing<br>tion.   |  | \$5.00 May Be<br>Added to Fees  |  | rida Depa    | k payable triment of S                                   | to:<br>itate                                  |
| ŠIGNATURE .  | Signature, typed or printed name of registered agent<br>Filling Fee is \$61.25<br>Due by May 1, 2008   |   | 9. Election Ca   | ampaign F<br>Contribut   | Financing<br>tion.   |  | \$5.00 May Be<br>Added to Fees  | Flo  | rida Depa    | k payable threat of S                                    | to:<br>itate                                  |
| SIGNATURE  | Filing Fee is \$61.25  Due by May 1, 2008  OFFICERS AND DI  P  SERAVELLO, RALPH  |   | 9. Election Ca<br>Trust Fund                                   | ampaign F<br>Contribut   | Financing<br>tion.   | Pres   | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA   | Flo<br>NGES TO OFFIC   | rida Depa    | k payable triment of S                                   | to:<br>State                                  |
| SIGNATURE  10: TITLE NAME STREET ADDRESS   | Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI P SERAVELLO, RALPH 627 SE 32 ST  |   | 9. Election Ca<br>Trust Fund                                   | ampaign F<br>Contribut<br>11.<br>TITL<br>NAM<br>STRI   | Financing tion.  E  ME  EET ADDRESS  | Pres   | \$5.00 May Be Added to Fees ADDITIONS/CHASIDENT Jere SE 32nd  | NGES TO OFFICE<br>my<br>Terrace  | rida Depa    | k payable threat of S                                    | to:<br>State                                  |
| SIGNATURE  110:  1111E  NAME  STREET ADDRESS  CITY-SI-ZIP  | Filing Fee is \$61.25 Due by May 1, 2008  OFFICERS AND DI  P SERAVELLO, RALPH 627 SE 32 ST CAPE CORAL, FL 33904  |   | 9. Election Ca<br>Trust Fund                                   | ampaign F Contribut 11. TITL NAM STRI  | Financing tion.  E ME EET ADDRESS (-ST-ZIP   | Pres<br>Tayl<br>906<br>Cape  | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA<br>Sident<br>lor, Jere<br>SE 32nd<br>e Coral,   | MGES TO OFFICE<br>my<br>Terrace<br>FL 33904                                  | rida Depa    | ck payable ( intment of S DIRECTORS II  Change           | to:<br>itate<br>N 10<br>Addition              |
| SIGNATURE  110:  IITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE   | principle to prince of registered agent principles of register |   | 9. Election Ca<br>Trust Fund                                   | Ampaign F Contribut 11. TITL NAM STRI CITY   | Financing tion.  E  ME  EEET ADDRESS (-ST-ZIP  | Pres<br>Tayl<br>906<br>Cape  | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHA<br>Sident<br>lor, Jere<br>SE 32nd<br>Coral,<br>e Preside  | NGES TO OFFICI<br>my<br>Terrace<br>FL 33904<br>nt                            | rida Depa    | k payable threat of S                                    | to:<br>State                                  |
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STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33993

STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33993

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

03/10/08 339-677-6860 Date Dayline Phone #