## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#713396** 

FILED Jun 20, 2008 Secretary of State

Entity Name: GREATER FT. MEYERS JR. FOOTBALL ASSOCIATION, INC.

	rincipal Place of Business:	New Principal Place of Business:	New Principal Place of Business:	
50 SOUTH FT. MYER	1 RD S, FL 33911			
Current M	lailing Address:	New Mailing Address:		
P.O. BOX FT. MYER	6393 S, FL 33911			
In accordan	: 59-1774693 FEI Number Applied For ( ce with s. 607.193(2)(b), F.S., the corporation I Address of Current Registered Ager	did not receive the prior notice.	. ,	
RIVERA, E 804 ZANA FT. MYER				
	named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered ag	ent, or both,	
SIGNATUI	RE:			
	Electronic Signature of Registere	d Agent Date		
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS	
Title: Name: Address:	PRES ( ) Delete RIVERA, ERIC 804 ZANA DR. FT MYERS, FL 33916	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		
Jity-St-∠ip:				
Γitle: Name: Address:	V.P ( ) Delete LILLARD, RONALD 3910 5TH ST. W LEHIGH ACRES, FL 33971	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:		
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	LILLARD, RONALD 3910 5TH ST. W	Name: Address:		
City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:  Title: Name: Address: City-St-Zip:	LILLARD, RONALD 3910 5TH ST. W LEHIGH ACRES, FL 33971  V.P2 (X) Delete CEASER, ROOSEVELT 302 GRETCHEN AVE.	Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	LILLARD, RONALD 3910 5TH ST. W LEHIGH ACRES, FL 33971  V.P2 (X) Delete CEASER, ROOSEVELT 302 GRETCHEN AVE. LEHIGH ACRES, FL 33971  TRES () Delete AVILA, HECTOR 4725 DUERA MAE DR.	Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:		

I hereby certify that the information supplied with this filing does not qualify 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: HECTOR AVILA TREA 06/20/2008