

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 713396

**FILED**  
**Jun 16, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

50 SOUTH RD  
FT. MYERS, FL 33911

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6393  
FT. MYERS, FL 33911

**New Mailing Address:**

P.O. BOX 6393  
FT MYERS, FL 33911

**FEI Number:** 59-1774693

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RIVERA, ERIC  
804 ZANA DR.  
FT. MYERS, FL 33916 US

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

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:**

Title: PRES  
Name: RIVERA, ERIC  
Address: 804 ZANA DR.  
City-St-Zip: FT MYERS, FL 33916

Title: V.P  
Name: LILLARD, RONALD  
Address: 3910 5TH ST. W  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: TRES  
Name: AVILA, HECTOR  
Address: 4725 DUERA MAE DR.  
City-St-Zip: FT.MYERS, FL 33908

Title: SEC  
Name: AVILA, XAVIERA  
Address: 4725 DUERA MAE DR.  
City-St-Zip: FT. MYERS, FL 33908

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: HECTOR AVILA

TREA

06/16/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date