2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#713545

FILED May 23, 2009 Secretary of State

Entity Name: LAKELAND GATORS YOUTH ATHLETIC ASSOCIATION, INC.

| Current Principal Place of Business: | | New Principal Place of Business: |
|---|--|--|
| P.O. BOX | OD DRIVE E. 6963 D, FL 338076963 | 1000 E EDGEWOOD DRIVE LAKELAND, FL 33803 |
| Current Mailing Address: | | New Mailing Address: |
| P.O. BOX | OD DRIVE E. 6963 D, FL 338076963 | 1000 E EDGEWOOD DRIVE LAKELAND, FL 33803 |
| In accordan | : 59-2638920 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation of | did not receive the prior notice. |
| Name and | d Address of Current Registered Agen | t: Name and Address of New Registered Agent: |
| CLARK, LARRY 6832 ECHO LANE LAKELAND, FL 33813 US | | VINCENT, CRAIG 2016 CHARMES COURT LAKELAND, FL 33813 US |
| | e named entity submits this statement for e of Florida. | the purpose of changing its registered office or registered agent, or both, |
| SIGNATURE: CRAIG VINCENT | | 05/23/2009 |
| | Electronic Signature of Registered | Agent Date |
| OFFICER | S AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR |
| Title: Name: Address: City-St-Zip: | TD () Delete MITCHELL, BECKY 1475 WOODLAKE DR # 203 LAKELAND, FL 33803 | Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: Address: City-St-Zip: | S () Delete LAMPP, KRISTI 9180 LOBLOLY PINE PLACE LAKELAND, FL 33880 | Title: S (X) Change () Addition Name: LAMPP, KRISTI Address: 9180 LOBLOLLY PINE PLACE City-St-Zip: LAKELAND, FL 33810 |
| Title: Name: Address: City-St-Zip: | P () Delete CLARK, LARRY 6320 SUNNYWAY LAKELAND, FL 33813 | Title: P (X) Change () Addition Name: VINCENT, CRAIG Address: 2016 CHARMES COURT City-St-Zip: LAKELAND, FL 33813 |
| Title: Name: Address: | AD () Delete SARRATT, CHRIS | Title: AD (X) Change () Addition Name: CUNDIFF, DANIEL Address: 5325 MISTY LAKE DRIVE |
| City-St-Zip: | 5087 BLACK BIRCH TRAIL MULBERRY, FL 33860 | City-St-Zip: MULBERRY, FL 33860 |

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: KRISTI LAMPP S 05/23/2009