## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#718652**

FILED Feb 25, 2004 Secretary of State

Entity Name: NORTHEAST RAIDERS YOUTH ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
PO BOX 1: ST. PETER	338 RSBURG, FL 33731 US			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
PO BOX 1: ST. PETER	338 RSBURG, FL 33731 US			
FEI Number:	: 51-0194403 FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
	JOHN SAS AVE NE TERSBURG, FL 33703 US			
	named entity submits this statement for the pure of Florida.	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:			
	Electronic Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( ) Delete ZACH, SISSI 1124 SEVILLE LANE NE SAINT PETERSBURG, FL 33702	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD ( ) Delete MALLUE, BARBARA 1760 63RD AVE N ST. PETERSBURG, FL 33704	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete ANDREWS, BILL 140 9TH AVE. N SAINT PETERSBURG, FL 33701	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) Delete SHERIDAN, ROBERT 1110 47TH AVE. N SAINT PETERSBURG, FL 33703	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD ( ) Delete TERNS, JEANNE 441 ROTARY PLACE NE SAINT PETERSBURG, FL 33703	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VD ( ) Delete BISHOP, TERRI 9545 2ND ST N SAINT PETERSBURG, FL 33702	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BARBARA MALLUE SEC 02/25/2004