


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 05, 2006 08:00 AM
Secretary of State

DOCUMENT # 726987	
1. Entity Name BARTOW YOUTH FOOTBALL BOOSTERS' CLUB, INC. <i>Yellow Jacket</i>	

Principal Place of Business TOMMY WALKER FIELD ST. RD. 555 BARTOW FL 33830	Mailing Address 1503 RICHMOND RD. LAKELAND FL 33801
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/05)

4. FEI Number 59-2962038	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
WEBSTER, FRANK 1503 RICHMOND RD. LAKELAND FL 33801

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE *Frank Webster* *Frank Webster* *4/29/06*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> Delete
NAME	WEBSTER, FRANK
STREET ADDRESS	1503 RICHMOND RD.
CITY-ST-ZIP	LAKELAND FL 33801
TITLE	<input type="checkbox"/> Delete
NAME	V/T HALL, TALLY
STREET ADDRESS	3110 RIVER OAK DR.
CITY-ST-ZIP	BARTOW FL 33830
TITLE	<input type="checkbox"/> Delete
NAME	S TOWNES, CONNIE
STREET ADDRESS	3923 PELICAN CT
CITY-ST-ZIP	LAKELAND FL 33813
TITLE	<input type="checkbox"/> Delete
NAME	D STRETTON, DON
STREET ADDRESS	640 PINECREST
CITY-ST-ZIP	BARTOW FL 33830
TITLE	<input type="checkbox"/> Delete
NAME	D HADDEN, PHIL
STREET ADDRESS	6600 HWY 60 E
CITY-ST-ZIP	BARTOW FL 33830
TITLE	<input type="checkbox"/> Delete
NAME	D WASHINGTON, GARETH
STREET ADDRESS	795 BAKER AVE
CITY-ST-ZIP	BARTOW FL 33830

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000563670
05/20/06-80020-021 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: *Frank Webster* *4/29/06* *865-640-5217*