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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **727410**

1. Corporation Name
LAKE YOUTH FOOTBALL ASSOCIATION, INC.

* 5 6 0 7 6 3 *
560763 - 90073 - 30

Principal Place of Business	Mailing Address
P.O. BOX 406 EUSTIS FL 32727	P.O. BOX 406 EUSTIS FL 32727

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 P.O. Box 398	26 P.O. Box 398	09/10/1973
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1536657 ☐ Applied For ☐ Not Applicable
City & State 23 Eustis, Fla	City & State 28 Eustis FL	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip / Country 24 32726 25 AMERICA	Zip / Country 29 32726 30 AMERICA	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MCPHERSON, BECKI 105 RIDGEVIEW DR EUSTIS FL 32726	81 Name: Michael McKinney 82 Street Address (P.O. Box Number is Not Acceptable): 110 W. Herrick Ave 83 84 City: Eustis FL 85 Zip Code: 32726

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and date, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCPHERSON, BECKI 105 RIDGEVIEW DRIVE EUSTIS FL	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Commissioner Michael McKinney 110 W. Herrick Ave Eustis Fla 32726	☒ Change ☐ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD SAUNDERS, JOHNNIE 1210 WALL ST EUSTIS FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Program Director James Hooks 37050 Sandy Lane Grand Island, Fla. 32735	☒ Change ☐ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WINKLER, TINA 43832 COOTER POND DELAND FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Treasurer RILEY TURNER 17607 S.E. 283 Ave. UMATILLA FLA 32784	☒ Change ☐ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T PASKIET, SHERRIE 403 FLORAL AVE EUSTIS FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	Cheer Coordinator MELANIE JOHNSON P.O. 398 Eustis FL 32727	☒ Change ☐ Addition D
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

14. *I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.*

SIGNATURE: SIGNATURE REQUIRED 4/3/99 (352) 357-1750
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #