2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005
Secretary of State

DOCUMENT# 734486

Entity Name: GLADES COUNTY YOUTH ATHELETIC ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 134
MOORE HAVEN, FL 33471 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 134
MOORE HAVEN, FL 33471 US

New Mailing Address:

FEI Number: 59-2821895 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, CHAD
1100 FOX LANE
MOORE HAVEN, FL 33471 US

Name and Address of New Registered Agent:

SCHLUETER, JERRI L
299 AVENUE K
MOORE HAVEN, FL 33471 US

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: JERRI L. SCHLUETER 03/28/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: THOMAS, CHAD
Address: 1100 FOX LANE
City-St-Zip: MOORE HAVEN, FL 33471

Title: VPD ( ) Delete
Name: EIGHNER, JAKE
Address: 1100 FOX LANE
City-St-Zip: MOORE HAVEN, FL 33471

Title: SD ( ) Delete
Name: RIDGDILL, SHELLY
Address: 1100 FOX LANE
City-St-Zip: MOORE HAVEN, FL 33471

Title: T ( ) Delete
Name: LYNN SCHLUETER, JERRI
Address: 1100 FOX LANE
City-St-Zip: MOORE HAVEN, FL 33471

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: JONES, TIMOTHY P
Address: 299 AVENUE K
City-St-Zip: MOORE HAVEN, FL 33471

Title: VPD (X) Change ( ) Addition
Name: EIGHNER, JAKE
Address: 299 AVENUE K
City-St-Zip: MOORE HAVEN, FL 33471

Title: SD (X) Change ( ) Addition
Name: SCHLUETER, JERRI L
Address: 299 AVENUE K
City-St-Zip: MOORE HAVEN, FL 33471

Title: T (X) Change ( ) Addition
Name: SCHLUETER, JERRI L
Address: 299 AVENUE K
City-St-Zip: MOORE HAVEN, FL 33471

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: JERRI L. SCHLUETER SD 03/28/2005
Electronic Signature of Signing Officer or Director Date