

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743496

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: PINECREST YOUTH FOOTBALL, INC.

**Current Principal Place of Business:**

7950 LITHIA PINECREST RD.  
LITHIA, FL 33547

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10  
LITHIA, FL 33547

**New Mailing Address:**

FEI Number: 59-2901671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STALLINGS, GREG  
5913 JAEGERGLEN DR  
LITHIA, FL 33547 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: STALLINGS, GREG  
Address: 5913 JAEGERGLEN DR  
City-St-Zip: LITHIA, FL 33547

Title: VP ( ) Delete  
Name: LYCETT, GEORGE  
Address: 5924 JAEGERGLEN DR  
City-St-Zip: LITHIA, FL 33547

Title: T ( ) Delete  
Name: COGGINS, D. TRACY  
Address: 15915 SORAWATER DRIVE  
City-St-Zip: LITHIA, FL 33547

Title: S ( ) Delete  
Name: KLENKE, DENEEN  
Address: 5608 EAGLEGLLEN PLACE  
City-St-Zip: LITHIA, FL 33547

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: GREEN, SHEILA  
Address: 5810 SIERRA CREST LN  
City-St-Zip: LITHIA, FL 33547

Title: S (X) Change ( ) Addition  
Name: WALLY, MEG  
Address: 1302 PELOTE CEMETERY  
City-St-Zip: LITHIA, FL 33547

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: SHEILA S. GREEN

T

04/23/2008

Electronic Signature of Signing Officer or Director

Date