

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744947

FILED
Apr 14, 2009
Secretary of State

Entity Name: PINELLAS PARK YOUTH SOCCER ASSOCIATION, INC.

Current Principal Place of Business:

3750 66TH AVE N
PINELLAS PARK, FL 337802094 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2094
PINELLAS PARK, FL 337802094 US

New Mailing Address:

FEI Number: 59-1885265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, TIM
5319 58TH AVE
SAINT PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

BRUCE, CHIP
6973 CEDAR RIDGE DR
PINELLAS PARK, FL 33781 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: CHIP BRUCE

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: SMITH, TIM
Address: 5319 58TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

Title: D () Delete
Name: FERROL, LARRY
Address: 2341 LORENA LANE
City-St-Zip: CLEARWATER, FL 33765

Title: S () Delete
Name: ANNON, VICKI
Address: 6000 96TH TERRACE NORTH
City-St-Zip: PINELLAS PARK, FL 33782

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRUCE, CHIP
Address: 6973 CEDAR RIDGE DR
City-St-Zip: PINELLAS PARK, FL 33781

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

Title: S (X) Change () Addition
Name: HALL, RON
Address: 1280 86TH TERRACE N
City-St-Zip: ST. PETERSBURG, FL 33702

Title: VP () Change (X) Addition
Name: ACKLEY, JEREMY
Address: 5427 95TH TERRACE
City-St-Zip: PINELLAS PARK, FL 33782

Title: T () Change (X) Addition
Name: GAMBLE, ROBERT
Address: 7820 OLIVER ROAD
City-St-Zip: LARGO, FL 33777

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: CHIP BRUCE

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date