

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746806

FILED  
Apr 10, 2006  
Secretary of State

**Entity Name:** THE AZALEA YOUTH SOCCER LEAGUE, INC.

**Current Principal Place of Business:**

P.O. BOX 40343  
ST PETERBURG, FL 33743 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 40343  
ST PETERBURG, FL 33743 US

**New Mailing Address:**

**FEI Number:** 59-2027335

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLIGAN, JOE F ESQ  
712 16TH ST N  
SAINT PETERSBURG, FL 33705 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: VPD ( ) Delete  
Name: CHEIS, DUFFY  
Address: 5224 56 TERR N  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D ( ) Delete  
Name: RASMUSSEN, TOM  
Address: 5375 16TH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: TD (X) Delete  
Name: GUNNIN, STEPHEN  
Address: 4825 33 AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: SD ( ) Delete  
Name: MILLIGAN, SALLY  
Address: 1300 COUNTRY CLUB RD N  
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: D ( ) Delete  
Name: ALLEN, ROBERT L  
Address: 8155 ELBOW LANE  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D ( ) Delete  
Name: MILLIGAN, JOE  
Address: 712 16TH ST N  
City-St-Zip: ST. PETERSBURG, FL 33705

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

Title: VPD (X) Change ( ) Addition  
Name: CHRIS, DUFFY  
Address: 5224 56 TERR N  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: DP (X) Change ( ) Addition  
Name: BURDEN, KEITH  
Address: 8540 GARDENIA CR  
City-St-Zip: SEMINOLE, FL 33777

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH MILLIGAN

D

04/10/2006

Electronic Signature of Signing Officer or Director

Date