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Feb 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 754761 (5)

1. Corporation Name

TAMPA BAY YOUTH FOOTBALL CONFERENCE, INC.

Principal Place of Business

Mailing Address

P.O. BOX 3233
PLANT CITY FL 33564-3233

P.O. BOX 3233
PLANT CITY FL 33564-3233

3. Date Incorporated or Qualified

08/22/1980

4. FEI Number

59-3072616

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SIMMONS, EARL W III
5112 S. MUD LAKE RD.
PLANT CITY FL 33567

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1998

TITLE PD ☐ DELETE
 NAME PROCTOR, EARL W III
 STREET ADDRESS 5112 S. MUD LAKE RD.
 CITY-ST-ZIP PLANT CITY FL 33567

1.1 TITLE PD ☒ Change ☐ Addition
 1.2 NAME BILL EVANS
 1.3 STREET ADDRESS 8623 ALAFIA RIDGE RD.
 1.4 CITY-ST-ZIP RIVERVIEW FL 33569

TITLE VPD ☐ DELETE
 NAME SHIRLEY, TOMMY
 STREET ADDRESS 3508 NICHOLS RD.
 CITY-ST-ZIP LITHIA FL 33547

2.1 TITLE VPD ☐ Change ☐ Addition
 2.2 NAME TOMMY SHIRLEY
 2.3 STREET ADDRESS 3508 NICHOLS RD.
 2.4 CITY-ST-ZIP LITHIA, FL 33547

TITLE VPD ☐ DELETE
 NAME EVANS, BILL
 STREET ADDRESS 8623 ALAFIA RIDGE RD.
 CITY-ST-ZIP RIVERVIEW FL 33569

3.1 TITLE SD ☒ Change ☐ Addition
 3.2 NAME EARL W. SIMMONS, III
 3.3 STREET ADDRESS 5112 S. MUD LAKE RD.
 3.4 CITY-ST-ZIP PLANT CITY FL 33567

TITLE VPD ☐ DELETE
 NAME JUDAH, RUSTY
 STREET ADDRESS 3803 JUDAH RD.
 CITY-ST-ZIP PLANT CITY FL 33566

4.1 TITLE D ☒ Change ☐ Addition
 4.2 NAME BESSIE DAVIS
 4.3 STREET ADDRESS 2782 FRAZIER ST.
 4.4 CITY-ST-ZIP BARTOW FL 33830

TITLE SD ☐ DELETE
 NAME DAVIS, BESSIE
 STREET ADDRESS 2782 FRAZIER ST.
 CITY-ST-ZIP BARTOW FL 33830

5.1 TITLE ☐ Change ☐ Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

TITLE TD ☐ DELETE
 NAME SETTLE, BILL
 STREET ADDRESS P.O. BOX 1411, N/A
 CITY-ST-ZIP THONOTOSASSA FL 33592

6.1 TITLE ☐ Change ☐ Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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 any attachment with an address.

SIGNATURE: *Earl W. Simmons III* *Earl W. Simmons III* 1-20-98

CP2E037 (10/97)