

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763610

FILED
Jun 19, 2007
Secretary of State

Entity Name: AUBURNDALE YOUTH FOOTBALL LEAGUE, INC.

Current Principal Place of Business:

P.O. BOX 2131
AUBURNDALE, FL 33823

New Principal Place of Business:

99 ROBINSON STREET
AUBURNDALE, FL 33823

Current Mailing Address:

P.O. BOX 2131
AUBURNDALE, FL 33823

New Mailing Address:

FEI Number: 59-2157517 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BANKS, TARA PD
127 QUAILWOOD DRIVE
WINTER HAVEN, FL 33880 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BANKS, TARA
Address: 127 QUAILWOOD DRIVE
City-St-Zip: WINTER HAVEN, FL 33880

Title: VD () Delete
Name: JOHNSON, DEXTER
Address: 504 OSHEA COURT, APT B
City-St-Zip: AUBURNDALE, FL 33823

Title: TD () Delete
Name: GOERS, DAWN
Address: PO BOX 2365
City-St-Zip: EAGLE LAKE, FL 33839

Title: SD (X) Delete
Name: LAUREANO, ALMA
Address: 269 DIAMOND RIDGE BLVD
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: BIRTHISEL, BETH
Address: 233 24TH COURT SW
City-St-Zip: WINTER HAVEN, FL 33880

Title: SD (X) Change () Addition
Name: ARMSTRONG, SUZANNE
Address: 9118 LAKE HATCHINEHA ROAD
City-St-Zip: HAINES CITY, FL 33844

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

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: TARA E BANKS

PD

06/19/2007

Electronic Signature of Signing Officer or Director

Date