2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#766928

FILED Jan 22, 2009 Secretary of State

Entity Name: EAST LAKE YOUTH SPORTS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

PO BOX 1063 36181 EAST LAKE RD

OLDSMAR, FL 34677 PALM HARBOR, FL 34685 US US

Current Mailing Address: New Mailing Address:

PO BOX 1063

OLDSMAR, FL 34677 US

FEI Number: 59-2422989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

KUTCHINS, BRYAN A KUTCHINS, BRYAN A 3974 TAMPA ROAD 3974 TAMPA ROAD OLDSMAR, FL 34677 US SUITE A OLDSMAR, FL 34677 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:

01/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

WESTWOOD, BILL ROMARY, MARY Name: Name: Address: 36181 EAST LAKE RD Address: 36181 EAST LAKE RD City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34685

Title: () Delete Title: () Change () Addition

Name: WATSON, RICK Name: Address: 3376 TARPON WOOD BLVD Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

POSA VEC, ROB Name: DEBELLIS, KAREN Name: 36181 EAST LAKE RD 36181 EAST LAKE RD Address: Address: City-St-Zip: PALM HARBOR, FL 34685 City-St-Zip: PALM HARBOR, FL 34685

Title: () Delete Title: () Change () Addition

Name: KUTCHINS, BRYAN A Name: Address: 3974 TAMPA RD., STE A Address: City-St-Zip: OLDSMAR, FL 34677 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: BRYAN A. KUTCHINS D 01/22/2009