

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 10, 2007**  
**Secretary of State**

DOCUMENT# N00000004031

**Entity Name:** WESLEY CHAPEL ATHLETIC ASSOCIATION, INC.**Current Principal Place of Business:**5450 BRUCE B DOWNS PMB 304  
WESLEY CHAPEL, FL 33543**New Principal Place of Business:****Current Mailing Address:**5450 BRUCE B DOWNS PMB 304  
WESLEY CHAPEL, FL 33543**New Mailing Address:****FEI Number:** 59-3653523**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MCARTHUR, BRENDA  
8602 SNOWY OWL WAY  
TAMPA, FL 33647 US**Name and Address of New Registered Agent:**STRINGFIELD, NANCY L T  
1329 STOKESLEY PLACE  
WESLEY CHAPEL, FL 33543 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: NANCY L STRINGFIELD

10/10/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FITZSIMONS, THOMAS  
Address: 29036 RIVERGATE RUN  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: T ( ) Delete  
Name: MCARTHUR, BRENDA S  
Address: 8602 SNOWY OWL WAY  
City-St-Zip: TAMPA, FL 33647

Title: SD ( ) Delete  
Name: CAPORALI, MARY-MARGARET  
Address: 28475 GREAT BEND PL  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: VP ( ) Delete  
Name: OSTERMAN, BRET  
Address: 1417 CALADESI DR.  
City-St-Zip: WESLEY CHAPEL, FL 33543

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

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

Title: T (X) Change ( ) Addition  
Name: STRINGFIELD, NANCY L  
Address: 1329 STOKESLEY PLACE  
City-St-Zip: WESLEY CHAPEL, FL 33543

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 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: NANCY L STRINGFIELD

T

10/10/2007

Electronic Signature of Signing Officer or Director

Date