

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004466

FILED
Apr 23, 2006
Secretary of State

Entity Name: PINELLAS AREA REFEREES, INC.

Current Principal Place of Business:

3156 47TH AVENUE SOUTH
ST. PETERSBURG, FL 33711

New Principal Place of Business:

Current Mailing Address:

P O BOX 10212
ST. PETERSBURG, FL 33733

New Mailing Address:

FEI Number: 59-3474374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAYTON, KENNETH
3156 47TH AVENUE SOUTH
ST. PETERSBURG, FL 33711 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: TT () Delete
Name: MYRICK, EDREKA D
Address: 2894 63RD AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33712

Title: ST () Delete
Name: SIMMONS, SONYA
Address: 2264 22ND AVE. S.
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: VT () Delete
Name: REEDY, BERNARD
Address: 4460 POMPONO DR. SE
City-St-Zip: ST. PETERSBURG, FL 33705

Title: PD () Delete
Name: DRAYTON, KENNETH
Address: 3156 47TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VT (X) Change () Addition
Name: WELLS, ED
Address: 429 HARBOR DRIVE SOUTH
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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: EDREKA D MYRICK

TT

04/23/2006

Electronic Signature of Signing Officer or Director

Date