

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006769

FILED
Mar 29, 2009
Secretary of State

Entity Name: SOUTH FLORIDA YOUTH BASKETBALL ASSOCIATION, INC.

Current Principal Place of Business:

16100 NW 21ST ST
PEMBROKE PINES, FL 33028

New Principal Place of Business:

Current Mailing Address:

16100 NW 21ST ST
PEMBROKE PINES, FL 33028

New Mailing Address:

FEI Number: 65-0982715

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOSA, ERNEST
16100 NW 21ST ST
PEMBROKE PINES, FL 33028 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: PD () Delete
Name: SOSA, ERNEST
Address: 16100 NW 21ST ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: VD () Delete
Name: MILLER, JOHN
Address: 1288 NW 106TH ST
City-St-Zip: PLANTATION, FL 33322

Title: VD () Delete
Name: JONES, JERRY
Address: 3822 44TH ST
City-St-Zip: SUNRISE, FL 33028

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ERNEST SOSA

PD

03/29/2009

Electronic Signature of Signing Officer or Director

Date