

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007131

FILED
Feb 12, 2009
Secretary of State

Entity Name: FLAGLER COUNTY POLICE ATHLETIC LEAGUE, INC.

Current Principal Place of Business:

1 CORPORATE PLAZA
2J
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

1 CORPORATE PLAZA
2J
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3760637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOWELL, SIDNEY M
1100 E MOODY BLVD
BUNNELL, FL 32110 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: ED () Delete
Name: KELLEY, ZANE
Address: 1001 JUSTICE LANE
City-St-Zip: BUNNELL, FL 32110

Title: D () Delete
Name: CONKLIN, COLLEEN
Address: 229 OCEAN PALM DRIVE
City-St-Zip: FLAGLER BEACH, FL 32136

Title: P () Delete
Name: MITTEL, FRED
Address: 25 SLOGANEER TR.
City-St-Zip: PALM COAST, FL 32164

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MARINE, NICOLE
Address: 1 CORPORATE PLAZA DR
City-St-Zip: PALM COAST, FL 32137

Title: P (X) Change () Addition
Name: CLYMER, BARRY
Address: 11 WHEATON LANE
City-St-Zip: PALM COAST, FL 32164

Title: VP () Change (X) Addition
Name: FIGUEROA, MEL
Address: 8 WASER PL
City-St-Zip: PALM COAST, FL 32164

Title: S () Change (X) Addition
Name: BERNARD, KATHY
Address: 5 ELI PL
City-St-Zip: PALM COAST, FL 32164

Title: T () Change (X) Addition
Name: RISBY, TRACY
Address: 76 OSPREY CIRCLE
City-St-Zip: PALM COAST, FL 32132

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: NICOLE MARINE

D

02/12/2009

Electronic Signature of Signing Officer or Director

Date