

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000001608

FILED
Apr 25, 2007
Secretary of State

Entity Name: TREASURE COAST FOOTBALL CONFERENCE, INC.

Current Principal Place of Business:

9958 154 ROAD N
JUPITER, FL 33478

New Principal Place of Business:

Current Mailing Address:

1042 S W BENCHOR AVE
PORT SAINT LUCIE, FL 34953 US

New Mailing Address:

FEI Number: 65-1080907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYERLY, DAVID L SR
1042 SW BENCHOR AVE
PORT ST LUCIE, FL 349533424 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: P () Delete
Name: WILLIAMS, RICK
Address: 9858 154 ROAD N
City-St-Zip: JUPITER, FL 33478

Title: VP () Delete
Name: BYERLY, GARY
Address: 3075 SW LUCERNA ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: T () Delete
Name: BYERLY, DAVID L SR
Address: 1042 SW BENCHOR AVE
City-St-Zip: PORT ST LUCIE, FL 349533424

Title: D () Delete
Name: DARBY, WENDY
Address: 3071 CONTINENTAL DRIVE
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D () Delete
Name: SANFRATELLO, RICHARD
Address: 1638 NE SO HONG RD
City-St-Zip: JENSEN BEACH, FL 34957

Title: S () Delete
Name: SANFRATELLO, TERESA
Address: 1638 NE SO HONG RD
City-St-Zip: JENSEN BEACH, FL 34957

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:

Title: () Change () Addition
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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: DAVID L BYERLY

T

04/25/2007

Electronic Signature of Signing Officer or Director

Date