

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005200

FILED
Jul 20, 2005
Secretary of State

Entity Name: STUART YOUTH FOOTBALL ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1609
STUART, FL 349951609

New Principal Place of Business:

P.O. BOX 1976
STUART, FL 349951609

Current Mailing Address:

P.O. BOX 1609
STUART, FL 349951609

New Mailing Address:

P.O. BOX 1976
STUART, FL 349951609

FEI Number: 65-1123706 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHARTLEY, NATALIE
3786 SE MIDDLE ST.
STUART, FL 34997 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: ROBERSON, BRIAN
Address: 750 WHISPER RIDGE TRAIL
City-St-Zip: PALM CITY, FL 34990

Title: TS () Delete
Name: CHARTLEY, NATALIE L
Address: 3786 SE MIDDLE ST.
City-St-Zip: STUART, FL 34997

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HAMILTON, MORRIS
Address: 2743 SE INDIAN ST
City-St-Zip: STUART, FL 34997

Title: VP (X) Change () Addition
Name: SMITH, BETTY SUE
Address: 5653 SE INEZ AVE
City-St-Zip: STUART, FL 34997

Title: S () Change (X) Addition
Name: PARKS, QUANITA
Address: P O BOX 1744
City-St-Zip: STUART, FL 34995

Title: T () Change (X) Addition
Name: CHARTLEY, NATALIE L
Address: 3786 SE MIDDLE STREET
City-St-Zip: STUART, FL 34997

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NATALIE CHARTLEY

T

07/20/2005

Electronic Signature of Signing Officer or Director

_____ Date