2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006154

Entity Name: RIDGE YOUTH SPORTS ASSOCIATION, INC.

FILED Jan 17, 2007 Secretary of State

936 VIA BIANCA DR. 936 VIA BIANCA DR.

DAVENPORT, FL 33837 DAVENPORT, FL 33837 US

Current Mailing Address: New Mailing Address:

C/O PHYLLIS THIBAULT
P.O. BOX 137185
P.O. BOX 137185
P.O. BOX 137185
P.O. BOX 137185

CLERMONT, FL 34713 US

FEI Number: 59-3572949 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THIBAULT, PHYLLIS

14183 VISTA DEL LAGO BLVD

WINTER GARDEN, FL 34787 US

THIBAULT, PHYLLIS

14183 VISTA DEL LAGO BLVD.

WINTER GARDEN, FL 34787 US

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: PHYLLIS THIBAULT 01/17/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 PACE, ED
 Name:
 PACE, ED

 Address:
 936 VIA BIANCA DR.
 Address:
 936 VIA BIANCA DR.

 City-St-Zip:
 DAVENPORT, FL 33837
 City-St-Zip:
 DAVENPORT, FL 33837 US

 Name:
 SMITH, KRISTINE
 Name:
 SMITH, KRISTINE

 Address:
 936 VIA BIANCA DR.
 Address:
 936 VIA BIANCA DR.

 City-St-Zip:
 DAVENPORT, FL 33837
 City-St-Zip:
 DAVENPORT, FL 33837 US

Title: DT () Delete Title: DT (X) Change () Addition

Name: THIBAULT, PHYLLIS Name: THIBAULT, PHYLLIS
Address: 14183 VISTA DEL LAGO BLVD Address: 14183 VISTA DEL LAGO BLVD
City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787 US

Title: () Delete Title: V () Change (X) Addition

Name:Name:MCKINNIE, MICHELLEAddress:Address:16632 LA TRINA COURTCity-St-Zip:City-St-Zip:WINTER GARDEN, FL 34787 US

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: PHYLLIS THIBAULT DT 01/17/2007