

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 14, 2006
Secretary of State

DOCUMENT# N02000002262

Entity Name: TAMARAC YOUTH FOOTBALL LEAGUE INC.**Current Principal Place of Business:**9901 NW 77TH ST
TAMARAC, FL 33321**New Principal Place of Business:****Current Mailing Address:**PO BOX 771053
CORAL SPRINGS, FL 33077**New Mailing Address:****FEI Number:** 65-1021020**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MILLER, TIMOTHY
4410 NW 36TH ST A211
FORT LAUDERDALE, FL 33319 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: MILLER, TIMOTHY
Address: 4410 NW 36TH ST A211
City-St-Zip: FORT LAUDERDALE, FL 33319

Title: D () Delete
Name: CRAWFORD, JAMES
Address: 7818 SW 6TH STREET
City-St-Zip: N LAUDERDALE, FL 33068

Title: D () Delete
Name: FOSTER, CHRIS
Address: 8855 N.W. 28TH DR., #1
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: BERGDORF, MIKE
Address: 9511 NW 80 ST
City-St-Zip: FORT LAUDERDALE, FL 33321

Title: TD () Delete
Name: WAETJEN, MARY BETH
Address: 8260 NW 68TH TERR
City-St-Zip: TAMARAC, FL 33321

Title: SD () Delete
Name: SINGH, SHELLY
Address: 7634 NW 99 WAY
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MILLER, LATISHA
Address: 4410 NW 36 ST #A211
City-St-Zip: FT. LAUDERDALE, FL 33319

Title: VD (X) Change () Addition
Name: FOSTER, CHRIS
Address: 8855 N.W. 28TH DR., #1
City-St-Zip: CORAL SPRINGS, FL 33065

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

Title: TD (X) Change () Addition
Name: WAETJEN, MARIBETH
Address: 8290 NW 68TH TERR
City-St-Zip: TAMARAC, FL 33321

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

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: TIMOTHY MILLER

PD

03/14/2006

Electronic Signature of Signing Officer or Director

Date