


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 25, 2005 08:00 AM
Secretary of State

DOCUMENT # N02000004833	
1. Entity Name CLERMONT YOUTH FOOTBALL & CHEERLEADING CORPORATION	

Principal Place of Business P.O. BOX 120274 CLERMONT, FL 34712	Mailing Address P.O. BOX 120274 CLERMONT, FL 34712
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05052005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3605645	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent GARGANO, DEBRA 970 HADDOCK DRIVE CLERMONT, FL 34711
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$61.25 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000368272 05/25/05-80005-001 70.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARGANO, NINO 970 HADDOCK DRIVE CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BOND, MICHAEL 835 MARQUEE DR. CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WIEBE, TANYA 14923 HWY 561A CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CALABRARO, DEAN 7340 SO. FORK RANCH RD. CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GARGANO, DEBBIE 1650 DREW AVE. CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <u>Nino Gargano</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	<u>5/1/05</u> Date	<u>352-394-8693</u> Daytime Phone #
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