2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# N02000005006

Entity Name: THE ANTIOCH REDSKINS OF PLANT CITY INC.

Current Principal Place of Business:

8604 FRANKLIN RD.
PLANT CITY, FL 33565

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 210
SEFFNER, FL 33584

New Mailing Address:

FEI Number: 59-2863410 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BINGHAM, HEATHER
6317 BARTON RD
PLANT CITY, FL 33565 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:	WALL, RANDY	
Address:	3323 CHARLES WALL LANE	
City-St-Zip:	PLANT CITY, FL 33565	
Title:	VP	( ) Delete
Name:	BINGHAM, HEATHER L	
Address:	6317 BARTON RD	
City-St-Zip:	PLANT CITY, FL 33565	
Title:	T	( ) Delete
Name:	FAULK, JENNIFER M	
Address:	5410 THONOTOSASSA RD	
City-St-Zip:	PLANT CITY, FL 33565	
Title:	S	( ) Delete
Name:	MONROE, JACQULYN M	
Address:	11601 E. OLD HILLSBOROUGH AVE	
City-St-Zip:	SEFFNER, FL 33584	
Title:	VP	( ) Delete
Name:	MEJIA, JOSE L	
Address:	7921 W. KNIGHTS GRIFFIN RD	
City-St-Zip:	PLANT CITY, FL 33565	

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:	S	(X) Change ( ) Addition
Name:	MELISSA, COOPER	
Address:	1613 CROSSING DR	
City-St-Zip:	BRANDON, FL 33510	
Title:	VP	(X) Change ( ) Addition
Name:	LEON, MCKELVIN	
Address:	2502 E. SAM ALLEN RD	
City-St-Zip:	PLANT CITY, FL 33565	

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: HEATHER BINGHAM VP 04/10/2009
Electronic Signature of Signing Officer or Director — Date