

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000003651

**FILED**  
**Jan 20, 2010**  
**Secretary of State**

**Entity Name:** FLORIDA CHRISTIAN ATHLETIC LEAGUE, INC.

**Current Principal Place of Business:**

3536 NW 8 AVE  
GAINESVILLE, FL 32605

**New Principal Place of Business:**

3401 NW 34 STREET  
GAINESVILLE, FL 32605

**Current Mailing Address:**

PO BOX 357430  
GAINESVILLE, FL 32635

**New Mailing Address:**

**FEI Number:** 81-0609984

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WYATT, STEPHANIE  
3536 NW 8 AVE  
GAINESVILLE, FL 32605 US

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

WYATT, STEPHANIE  
3401 NW 34 STREET  
GAINESVILLE, FL 32605 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:

01/20/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: WYATT, STEPHANIE  
Address: PO BOX 357430  
City-St-Zip: GAINESVILLE, FL 32635

Title: DV  
Name: BOYER, TROY  
Address: 8057 ARLINGTON EXPRESSWAY  
City-St-Zip: JACKSONVILL, FL 32211

Title: DT  
Name: GOODWIN, TERRY  
Address: 110 PENIEL CHURCH ROAD  
City-St-Zip: PALATKA, FL 32177

Title: DS  
Name: TAYLOR, CINDY  
Address: 4605 NW 21 TERR.  
City-St-Zip: GAINESVILLE, FL 32605

I hereby 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 all other like empowered.

SIGNATURE: STEPHANIE WYATT

DP

01/20/2010

Electronic Signature of Signing Officer or Director

Date