

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005589

FILED  
Jan 25, 2009  
Secretary of State

Entity Name: CALLAHAN YOUTH SOCCER CLUB, INC

## Current Principal Place of Business:

34076 BALL PARK ROAD  
CALLAHAN, FL 32011 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1425  
CALLAHAN, FL 32011 US

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WOOD, CHRISTOPHER M PRES.  
45328 BISMARCK RD.  
CALLAHAN, FL 32011 US

## Name and Address of New Registered Agent:

HOOD, DONALD D PRES.  
3701 HEMLOCK ST  
JACKSONVILLE, FL 32218 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: DONALD D.HOOD

01/25/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: WOOD, CHRISTOPHER M  
Address: 45328 BISMARCK RD.  
City-St-Zip: CALLAHAN, FL 32011 US

Title: V ( ) Delete  
Name: HOOD, DONALD D  
Address: P.O.BOX 831  
City-St-Zip: CALLAHAN, FL 32011 US

Title: T ( ) Delete  
Name: TANYA, NORRIS S  
Address: 36144 PRATTSIDING RD.  
City-St-Zip: CALLAHAN, FL 32011 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HOOD, DONALD D  
Address: P.O.BOX 831  
City-St-Zip: CALLAHAN, FL 32011 US

Title: V (X) Change ( ) Addition  
Name: HARTFORD, WILLIAM E  
Address: 447346 US HWY 301  
City-St-Zip: CALLAHAN, FL 32011 US

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

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: DONALD D HOOD

P

01/25/2009

Electronic Signature of Signing Officer or Director

Date