

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008635

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** EASTSIDE YOUTH ATHLETIC ASSOCIATION INC

**Current Principal Place of Business:**

11674 CHERRY BARK DR. EAST  
JACKSONVILLE, FL 32218

**New Principal Place of Business:**

**Current Mailing Address:**

11674 CHERRY BARK DR. EAST  
JACKSONVILLE, FL 32218

**New Mailing Address:**

**FEI Number:** 61-1475481

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ACCOUNTING & BUSINESS SOLUTIONS  
9951 ATLANTIC BLVD  
418  
JACKSONVILLE, FL 32225 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: PAYNE, DONALD R  
Address: 11674 CHERRY BARK DR. E  
City-St-Zip: JACKSONVILLE, FL 32218

Title: T ( ) Delete  
Name: MINCEY, ARTHUR J  
Address: 8316 CASSIE RD  
City-St-Zip: JACKSONVILLE, FL 32221

Title: S ( ) Delete  
Name: BARTLEY, LORETTA  
Address: 724 E. 57TH ST.  
City-St-Zip: JACKSONVILLE, FL 32208

**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:

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: DONALD PAYNE

P

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date