

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009997

FILED  
Jun 14, 2008  
Secretary of State

**Entity Name:** ST. LUCIE COUNTY YOUTH FOOTBALL ORGANIZATION, INC

**Current Principal Place of Business:**

1112 AVENUE M  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

1211 AVENUE M  
FORT PIERCE, FL 34950

**Current Mailing Address:**

POST OFFICE BOX 1626  
FORT PIERCE, FL 34950

**New Mailing Address:**

**FEI Number:** 74-3146872      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WOULARD, CHESTER L  
3202 ANDERSON DRIVE  
FORT PIERCE,, FL 34946      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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: WOULARD, CHESTER L  
Address: 3202 ANDERSON DRIVE  
City-St-Zip: FORT PIERCE, FL 34946

Title: VP      ( ) Delete  
Name: FRANKLIN, WALTER  
Address: 4202 MATANZA ST.  
City-St-Zip: FORT PIERCE, FL 334946

Title: BK      ( ) Delete  
Name: WILSON, CLIFTON  
Address: PSL BOULEVARD  
City-St-Zip: PORT ST. LUCIE, FL 34980

Title: VP      ( ) Delete  
Name: WILLIAMS, JABARI  
Address: 2010 N. 37 TH. ST  
City-St-Zip: FORT PIERCE, FL 34946

Title: CC      ( ) Delete  
Name: THOMAS, LISA  
Address: 2006 NW RATCHES HARBOR RD  
City-St-Zip: PORT ST.LUCIE, FL 34982

Title: SECR      ( ) Delete  
Name: HUNT, BETTY  
Address: 2330 JUANITA ST.  
City-St-Zip: FORT PIERCE, FL 34946

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

Title: CC      (X) Change ( ) Addition  
Name: HALL, TRINA  
Address: HARMONY HEIGHT  
City-St-Zip: FORT PIERCE, FL 34946

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: CHESTER WOULARD

PRES

06/14/2008

Electronic Signature of Signing Officer or Director

Date