

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000443

FILED  
Oct 05, 2006  
Secretary of State

**Entity Name:** THE GLADES YOUTH FOOTBALL LEAGUE INC

**Current Principal Place of Business:**

1400 N W AVE F  
BELLE GLADE, FL 33430 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 2524  
BELLE GLADE, FL 33430 US

**New Mailing Address:**

**FEI Number:** 20-2143325 **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:**

GIBSON, WILLIE L  
1400 N W AVE F  
BELLE GLADE, FL 33430 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: WILLIE L. GIBSON

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: GIBSON, WILLIE L  
Address: 1400 N W AVE F  
City-St-Zip: BELLE GLADE, FL 33430 US

Title: VP ( ) Delete  
Name: HAMILTON, GREGORY  
Address: 972 S E 3RD ST  
City-St-Zip: BELLE GLADE, FL 33430 US

Title: TS ( ) Delete  
Name: GIBSON, JEANNIE  
Address: 660 S W 4TH ST APT 4  
City-St-Zip: BELLE GLADE, FL 33430 US

**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: WILLIE L. GIBSON

DIRE

10/05/2006

Electronic Signature of Signing Officer or Director

Date