

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006480

FILED  
Apr 02, 2008  
Secretary of State

**Entity Name:** IMMOKALEE SEMINOLES POP WARNER INC.

**Current Principal Place of Business:**

P. O. BOX 961  
IMOKALEE, FL 34143

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 961  
IMOKALEE, FL 34143

**New Mailing Address:**

**FEI Number:** 20-3099370

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GONZALEZ, DANIEL  
1109 W. JEFFERSON AVE.  
IMMOKALEE, FL 34142 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: GONZALEZ, DANIEL  
Address: 1109 W. JEFFERSON AVE  
City-St-Zip: IMMOKALEE, FL 34142

Title: VP ( ) Delete  
Name: FREEMAN, ERNEST  
Address: 201 DELAWARE AVE E.  
City-St-Zip: IMMOKALEE, FL 34142

Title: S ( ) Delete  
Name: GONZALEZ, SANDRA  
Address: 1109 W. JEFFERSON AVE  
City-St-Zip: IMMOKALEE, FL 34142

Title: T ( ) Delete  
Name: BETANCOURT, ROSALINDA  
Address: 1110 JEFFERSON AVE W.  
City-St-Zip: IMMOKALEE, FL 34142

**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:

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:** ROSALINDA BETANCOURT

T

04/02/2008

Electronic Signature of Signing Officer or Director

Date