

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008440

FILED
May 01, 2009
Secretary of State

Entity Name: HARDEE COUNTY YOUTH SPORTS INC.

Current Principal Place of Business:

1000 SOUTH FLORIDA AVE
WAUCHULA, FL 33873 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1003
WAUCHULA, FL 33873 US

New Mailing Address:

FEI Number: 20-3313793 **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:

BURTON, JOHN
519 WEST MAIN ST
WAUCHULA, FL 33873 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: KNIGHT, BRIAN
Address: 2587 MERLE LANGFORD RD
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: VP () Delete
Name: KNIGHT, DOUG
Address: 4102 NURSERY RD
City-St-Zip: ZOLFO SPRINGS, FL 33890 US

Title: SEC () Delete
Name: STEPHENS, BRENT
Address: 3175 OAKS BEND
City-St-Zip: BOWLING GREEN, FL 33834 US

Title: TREA () Delete
Name: MOORE, KEVIN
Address: P O BOX 1988
City-St-Zip: WAUCHULA, FL 33873 US

Title: VP () Delete
Name: PALMER, WEST
Address: 1211 ALTMAN ROAD
City-St-Zip: WAUCHULA, FL 33873

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: () 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: KEVIN MOORE

TREA

05/01/2009

Electronic Signature of Signing Officer or Director

Date