2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2009
Secretary of State

DOCUMENT# N05000011075

Entity Name: TRAILBLAZERS YOUTH ATHLETIC MINISTRY, INC.

Current Principal Place of Business:

13923 BRIDGEPORT DRIVE
TAMPA, FL 33625 US

New Principal Place of Business:

Current Mailing Address:

13923 BRIDGEPORT DRIVE
TAMPA, FL 33625 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SISTERS IN THE SPIRIT MINISTRY, INC.
7304 W. RIVERCHASE DRIVE
APT. 2704
TAMPA, FL 33637 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: FP ( ) Delete
Name: SMITH, REGINA M
Address: 13923 BRIDGEPORT DRIVE
City-St-Zip: TAMPA, FL 33625 US

Title: VP ( ) Delete
Name: PEOPLES, GEORGE K
Address: 13923 BRIDGEPORT DRIVE
City-St-Zip: TAMPA, FL 33625 US

Title: VP ( ) Delete
Name: PEOPLES, BERTIA A
Address: 13923 BRIDGEPORT DRIVE
City-St-Zip: TAMPA, FL 33625

Title: D ( ) Delete
Name: ROULHAC, DEBRA D
Address: 7304 W. RIVERCHASE DR. APT. 2704
City-St-Zip: TAMPA, FL 33637 US

Title: D ( ) Delete
Name: RIVERS, NEHEMIAH JR.
Address: 10040 CYPRESS SHADOW AVENUE
City-St-Zip: TAMPA, FL 33647

Title: D ( ) Delete
Name: CHAMBERS, ALEOUS
Address: 11728 LYNN BROOKE CIRCLE
City-St-Zip: TAMPA, FL 33584

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:

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: REGINA MCBRIDE-SMITH FP 04/18/2009

Electronic Signature of Signing Officer or Director — Date