

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003505

FILED
Jan 15, 2009
Secretary of State

Entity Name: FLORIDA KEYS YOUTH SPORTS FOUNDATION, INC.

Current Principal Place of Business:

103900B OVERSEAS HIGHWAY
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

103900B OVERSEAS HIGHWAY
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 20-4618018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STOKY, SCOTT
103900B OVERSEAS HIGHWAY
KEY LARGO, FL 33037 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: PEXD () Delete
Name: STOKY, SCOTT
Address: 103900B OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: V () Delete
Name: RUIZ, EMILIO
Address: 158 BAHAMA AVENUE
City-St-Zip: KEY LARGO, FL 33037

Title: T () Delete
Name: VAUGHN, KARINA
Address: 986 GIBRALTAR ROAD
City-St-Zip: KEY LARGO, FL 33037

Title: SD () Delete
Name: STOKY, AMY
Address: 103900B OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: COSME, KERRY
Address: 987 VALENCIA ROAD
City-St-Zip: KEY LARGO, FL 33037

Title: D () Delete
Name: SWANSON, WILLIAM
Address: 103900B OVERSEAS HIGHWAY
City-St-Zip: KEY LARGO, FL 33037

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
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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: SCOTT STOKY

PRES

01/15/2009

Electronic Signature of Signing Officer or Director

Date