

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000004193

FILED
Jan 20, 2009
Secretary of State

Entity Name: NATIONAL YOUTH FOOTBALL LEAGUE OF AMERICA, INC.

Current Principal Place of Business:

P. O. BOX 510006
MIAMI, FL 33151 US

New Principal Place of Business:

18520 NW 67TH AVENUE,
SUITE 181
MIAMI, FL 33015 US

Current Mailing Address:

P. O. BOX 510006
MIAMI, FL 33151 US

New Mailing Address:

FEI Number: 03-0597551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOPER, HAROLD B
270 SW 100TH TERRACE
PEMBROKE PINES, FL 33025 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: DARLING, GERALD L
Address: P. O. BOX 510006
City-St-Zip: MIAMI, FL 33151 US

Title: VP () Delete
Name: JOHNSON, SAM
Address: P. O. BOX 510006
City-St-Zip: MIAMI, FL 33151 US

Title: VP () Delete
Name: PRESLEY, SHIRLEY
Address: P. O. BOX 510006
City-St-Zip: MIAMI, FL 33151 US

Title: SEC () Delete
Name: WASHINGTON, EMANUEL
Address: P. O. BOX 510006
City-St-Zip: MIAMI, FL 33151 US

Title: TREA () Delete
Name: JOHNSON, RONALD
Address: P. O. BOX 510006
City-St-Zip: MIAMI, FL 33151 US

Title: VP () Delete
Name: ROLLE, LAKESHA
Address: P.O. BOX 510006
City-St-Zip: MIAMI, FL 33151 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CAMPBELL, LUTHER
Address: P. O. BOX 510006
City-St-Zip: MIAMI, FL 33151 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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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: RONALD M JOHNSON

TRES

01/20/2009

Electronic Signature of Signing Officer or Director

Date