2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008
Secretary of State

DOCUMENT# N06000008855

Entity Name: FLORIDA YOUTH HOCKEY FOUNDATION, INC.

Current Principal Place of Business:

4113 COSTA MESA LN
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

4113 COSTA MESA LN
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 74-3187248 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

THOMPSON, BRET
4113 COSTA MESA LN
ROCKLEDGE, FL 32955 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: CD ( ) Delete
Name: THOMPSON, BRET
Address: 4113 COSTA MESA LN
City-St-Zip: ROCKLEDGE, FL 32955

Title: VCD ( ) Delete
Name: NYMAN, PETER
Address: 2316 DEER CROFT DR
City-St-Zip: MELBOURNE, FL 32940

Title: STD ( ) Delete
Name: NICHOLSON, CARL
Address: 215 SEA DUNES DR
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D ( ) Delete
Name: CASHMAN, JOHN
Address: 1951 CRANE CREEK
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete
Name: JOHNSON, JEFFREY
Address: 278 PEBBLE HILL WAY
City-St-Zip: ROCKLEDGE, FL 32955

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: BRET THOMPSON CD 01/11/2008

Electronic Signature of Signing Officer or Director — Date