2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2009
Secretary of State

DOCUMENT# N07000000212

Entity Name: WEST BOYNTON FOOTBALL LEAGUE INC.

Current Principal Place of Business:

4400 CHARLOTTE ST.
G
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

1396 BLUE CLOVER LANE
WEST PALM BEACH, FL 33415

New Mailing Address:

FEI Number: 61-1523239 **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:

BOLDEN, JAMES H
1396 BLUE CLOVER LANE
WEST PALM BEACH, FL 33415 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:	MANKIN, EDWARD D	
Address:	7741 HANAHAN PLACE	
City-St-Zip:	LAKE WORTH, FL 33467	
Title:	VP	( ) Delete
Name:	DEMARCO, MIKE D	
Address:	1104 MANOR DRIVE	
City-St-Zip:	PALM SPRINGS, FL 33461	
Title:	T	( ) Delete
Name:	BOLDEN, JAMES H	
Address:	1396 BLUE CLOVER LANE	
City-St-Zip:	WEST PALM BEACH, FL 33415	
Title:	S	( ) Delete
Name:	PERSAD, STEVE	
Address:	9112 PARAGON WAY	
City-St-Zip:	BOYNTON BEACH, FL 33476	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

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:	S	(X) Change ( ) Addition
Name:	DOYLE, DAN	
Address:	5455 TWIN OAKS ROAD	
City-St-Zip:	LAKE WORTH, FL 33463	
Title:	VP	( ) Change (X) Addition
Name:	RYBAK, PAUL	
Address:	7493 KINGSLEY COURT	
City-St-Zip:	LAKE WORTH, FL 33467	

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: JAMES BOLDEN T 05/06/2009

Electronic Signature of Signing Officer or Director — Date