

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 02, 2008
Secretary of State

DOCUMENT# N07000004717

Entity Name: GOLDEN GATE GATORS YOUTH SPORTS ASSOCIATION, INC.**Current Principal Place of Business:**889 GRAND RAPIDS BLVD.
NAPLES, FL 34120**New Principal Place of Business:****Current Mailing Address:**889 GRAND RAPIDS BLVD.
NAPLES, FL 34120**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSENBALM, MARK
15215 COLLIER BLVD., STE. 311, PMB 301
NAPLES, FL 34119 US**Name and Address of New Registered Agent:**DORIA, MARIO
889 GRAND RAPIDS BLVD.
NAPLES, FL 34120 US

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: MARIO DORIA

05/02/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:Title: D () Delete
Name: ROSENBALM, MARK
Address: 15215 COLLIER BLVD., STE. 311, PMB 301
City-St-Zip: NAPLES, FL 34119Title: D () Delete
Name: DORIA, KIMBERLY
Address: 889 GRAND RAPIDS BLVD.
City-St-Zip: NAPLES, FL 34120Title: D () Delete
Name: DORIA, IDELSY
Address: 888 GRAND RAPIDS BLVD.
City-St-Zip: NAPLES, FL 34120**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: D (X) Change () Addition
Name: DORIA, MARIO
Address: 889 GRAND RAPIDS BLVD.
City-St-Zip: NAPLES, FL 34120Title: () 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: KIMBERLY DORIA

D

05/02/2008

Electronic Signature of Signing Officer or Director

Date