

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005024

FILED
May 08, 2009
Secretary of State

Entity Name: FLORIDA FOOTBALL ALLIANCE, INC.

Current Principal Place of Business:

305 SW 5TH AVENUE
DELRAY BEACH, FL 33444 US

New Principal Place of Business:

Current Mailing Address:

305 SW 5TH AVENUE
DELRAY BEACH, FL 33444 US

New Mailing Address:

FEI Number: 20-8976215 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:

Name and Address of New Registered Agent:

MCINTOSH, CHRISTOPHER A
305 SW 5TH AVENUE
DELRAY BEACH, FL 33444 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PAGE, TERRANCE SR.
Address: 305 SW 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: VP () Delete
Name: MCINTOSH, CHRISTOPHER A
Address: 305 SW 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: BD () Delete
Name: SWEETING, EDRICK
Address: PO BOX 2276
City-St-Zip: ONECO, FL 34264 US

Title: SEC () Delete
Name: JOHNSON, PATRICIA
Address: PO BOX 2276
City-St-Zip: ONECO, FL 34264 US

Title: TRE () Delete
Name: MCINTOSH, PAULA L
Address: 305 SW 5TH AVENUE
City-St-Zip: DELRAY BEACH, FL 33444 US

Title: BVC () Delete
Name: MORLEY, CLEVELAND JR
Address: 20300 NW15TH AVENUE
City-St-Zip: MIAMI, FL 33169 US

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:

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: PAULA L MCINTOSH

TRE

05/08/2009

Electronic Signature of Signing Officer or Director

Date