

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007840

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: OCALA YOUTH LACROSSE CLUB, INCORPORATED

**Current Principal Place of Business:**

1211 SE 22ND RD  
OCALA, FL 34471

**New Principal Place of Business:**

**Current Mailing Address:**

1211 SE 22ND RD  
OCALA, FL 34471

**New Mailing Address:**

FEI Number: 11-3819969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

KELLY, GREG  
7398 SW 12TH CIRCLE  
OCALA, FL 34480 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: BALBONI, PAUL  
Address: 1558 NE 10TH ST  
City-St-Zip: OCALA, FL 34470

Title: V ( ) Delete  
Name: RYAN, DENNIS  
Address: 9787 SE 138TH LOOP  
City-St-Zip: SUMMERFIELD, FL 34491

Title: D ( ) Delete  
Name: KELLY, GREG  
Address: 7398 SE 12TH CIRCLE  
City-St-Zip: OCALA, FL 34480

Title: D ( ) Delete  
Name: SMITH, YVONNE  
Address: 1211 SE 22ND RD  
City-St-Zip: OCALA, FL 34471

Title: T ( ) Delete  
Name: RYAN, GAIL  
Address: 9787 SE 138TH LOOP  
City-St-Zip: SUMMERFIELD, FL 34491

**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: PAUL BALBONI

PRES

04/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date