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: New Principal Place of Business: 1211 SE 22ND RD OCALA, FL 34471 **Current Mailing Address: New Mailing Address:** 1211 SE 22ND RD OCALA, FL 34471 FEI Number: 11-3819969 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KELLY, GREG 7398 SW 12TH CIRCLE OCALA, FL 34480 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BALBONI, PAUL Name: Name: Address: 1558 NE 10TH ST Address: City-St-Zip: OCALA, FL 34470 City-St-Zip: Title: () Delete Title: () Change () Addition RYAN, DENNIS Name: Name: Address: 9787 SE 138TH LOOP Address: City-St-Zip: SUMMERFIELD, FL 34491 City-St-Zip: Title: () Delete Title: () Change () Addition KELLY, GREG Name: Name: Address: 7398 SE 12TH CIRCLE Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SMITH, YVONNE Name: 1211 SE 22ND RD Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: Title: () Delete Title: () Change () Addition RYAN, GAIL Name: Name: 9787 SE 138TH LOOP Address: Address: SUMMERFIELD, FL 34491 City-St-Zip: 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