2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004037

FILED Apr 27, 2009 Secretary of State

Entity Name: NORTHEAST PENSACOLA WILDCATS FOOTBALL, INC.

Current Principal Place of Business: New Principal Place of Business:

3 W GARDEN ST STE 508 PENSACOLA, FL 32502

Current Mailing Address: New Mailing Address:

3 W GARDEN ST STE 508 PENSACOLA, FL 32502

FEI Number: 26-2427597 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:

CHILDERS, BRUCE 3 W GARDEN ST STE 508 PENSACOLA, FL 32502 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:

- Flateria Circulus I Davidoud Acad

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: P (X) Change () Addition
Name: HEANEY, CHRIS Name: HULION, TONY R
Address: 2340 INVERNIESS DR

Address: 2340 INVERNESS DR Address: 4417 LAJOLLA
City-St-Zip: PENSACOLA, FL 32503 City-St-Zip: PENSACOLA, FL 32504

Address: 4417 LAJOLLA Address: 3 W GARDEN STREET STE 508
City-St-Zip: PENSACOLA, FL 32504 City-St-Zip: PENSACOLA, FL 32502

Title: S () Delete Title: S (X) Change () Addition

 Name:
 CHILDERS, BRUCE
 Name:
 HEANEY, CHRIS

 Address:
 3 W GARDEN ST STE 508
 Address:
 2340 INVERNESS DR

 City-St-Zip:
 PENSACOLA, FL 32502
 City-St-Zip:
 PENSACOLA, FL 32503

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 Name:
 Name:
 CHILDERS, PAMELA L

 Address:
 Address:
 2405 HALLMARK DRIVE

 City-St-Zip:
 City-St-Zip:
 PENSACOLA, FL
 32503

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: PAMELA CHILDERS T 04/27/2009