

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09229

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: EAGLE YOUTH SPORTS, INC.

**Current Principal Place of Business:**

4200 DIKE ROAD  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 180412  
CASSELBERRY, FL 32718

**New Mailing Address:**

PO BOX 300587  
FERN PARK, FL 32730

FEI Number: 59-2552000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ARRINGTON, JOSEPH  
1448 ASTER CT  
WINTER PARK, FL 32792 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: ABNEY, TY  
Address: PO BOX 180412  
City-St-Zip: CASSELBERRY, FL 32718

Title: S ( ) Delete  
Name: JUDSKI, CYNTHIA  
Address: PO BOX 180412  
City-St-Zip: CASSELBERRY, FL 32718

Title: T ( ) Delete  
Name: ENGLERT, BETSY  
Address: PO BOX 180412  
City-St-Zip: CASSELBERRY, FL 32718

Title: VP ( ) Delete  
Name: THIESSEN, BOBBIE  
Address: PO BOX 180412  
City-St-Zip: CASSELBERRY, FL 32718

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JUDSKI, CYNTHIA  
Address: PO BOX 300587  
City-St-Zip: FERN PARK, FL 32730

Title: S (X) Change ( ) Addition  
Name: DIRIENZO, BARBARA  
Address: PO BOX 300587  
City-St-Zip: FERN PARK, FL 32730

Title: T (X) Change ( ) Addition  
Name: ENGLERT, BETSY  
Address: PO BOX 300587  
City-St-Zip: FERN PARK, FL 32730

Title: VP (X) Change ( ) Addition  
Name: THIESSEN, BOBBIE  
Address: PO BOX 300587  
City-St-Zip: FERN PARK, FL 32730

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: BETSY ENGLERT

T

04/27/2009

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

\_\_\_\_\_  
Date