

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000496

FILED  
Jan 25, 2012  
Secretary of State

**Entity Name:** IN THE ZONE FOOTBALL & CHEER CLINIC, INC.

**Current Principal Place of Business:**

330 NE 20TH ST.  
CAPE CORAL, FL 33909 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4573  
NORTH FT. MYERS, FL 33918 US

**New Mailing Address:**

**FEI Number:** 27-1687622

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KELLY, RONALD D  
330 NE 20TH ST.  
CAPE CORAL, FL 33909 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  
Name: KELLY, RONALD D  
Address: 330 NE 20TH ST.  
City-St-Zip: CAPE CORAL, FL 33909 US

I hereby 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 all other like empowered.

SIGNATURE: RONALD D KELLY

PRES

01/25/2012

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

\_\_\_\_\_  
Date