## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18275

FILED Jan 24, 2009 Secretary of State

Entity Name: BAY COUNTY YOUTH SOCCER ASSOCIATION, INC.

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

C/O THOMAS F. TONN 1572 DONNA AVE CALLAWAY, FL 32404 US

Current Mailing Address: New Mailing Address:

C/O THOMAS F. TONN P O BOX 10302 PANAMA CITY, FL 32404 US

FEI Number: 59-2808552 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:

TONN, THOMAS F ANGOVE, RICK 1572 DONNA AVE 4226 TRANSMITTER RD

CALLAWAY, FL 324048845 US PANAMA CITY, FL 32404 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: RICK ANGOVE 01/24/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD ( ) Delete Title: PRES (X) Change ( ) Addition Name: TONN, THOMAS F Name: ANGOVE, RICK

 Address:
 1572 DONNA AVE
 Address:
 4226 TRANSMITTER RD

 City-St-Zip:
 CALLAWAY, FL 324048845
 City-St-Zip:
 PANAMA CITY, FL 32404

Title: RD ( ) Delete Title: SEC (X) Change ( ) Addition

 Name:
 TONN, LISA
 Name:
 GREESON, SANDY

 Address:
 1572 DONNA AVE
 Address:
 1341 GRACE AVE

 City-St-Zip:
 CALLAWAY, FL 324048845
 City-St-Zip:
 PANAMA CITY, FL 32401

Title: P ( ) Delete Title: TRES (X) Change ( ) Addition Name: CHAILLOU, RICHARD Name: TONN, THOMAS F

 Address:
 504 CARRIE LN
 Address:
 1572 DONNA AVE

 City-St-Zip:
 LYNN HAVEN, FL 32444
 City-St-Zip:
 PANAMA CITY, FL 32404

Title: CD () Delete Title: VD (X) Change () Addition

 Name:
 THIBODAUX, RUTH III
 Name:
 PICKLE, MIKE

 Address:
 206 N MACARTHUR AVE
 Address:
 2201 ANDREWS RD

 City-St-Zip:
 PANAMA CITY, FL 32401
 City-St-Zip:
 LYNN HAVEN, FL 32444

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

 Name:
 Name:
 RICHARDSON, NATALIE

 Address:
 Address:
 3035 CLEARVIEW AVE

 City-St-Zip:
 City-St-Zip:
 PANAMA CITY, FL 32405

Title: UC ( ) Change (X) Addition

 Name:
 Name:
 NOLAND, JEFFERY

 Address:
 Address:
 1713 WOLF RUN LN

 City-St-Zip:
 City-St-Zip:
 PANAMA CITY, FL 32405

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: THOMAS F. TONN TRES 01/24/2009