

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22160

FILED
May 14, 2007
Secretary of State

Entity Name: ST. CLOUD YOUTH FOOTBALL, INC.

Current Principal Place of Business:

P.O. BOX 702028
ST CLOUD, FL 34770 US

New Principal Place of Business:

2355 HICKORY TREE RD.
ST CLOUD, FL 34772 US

Current Mailing Address:

P.O. BOX 702028
ST. CLOUD, FL 34770 US

New Mailing Address:

FEI Number: 59-2870285 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHANDLER, JAMIE
2972 MICAH CT
SAINT CLOUD, FL 34772 US

Name and Address of New Registered Agent:

SUMMERS, CHANCY
4150 OAKWOOD DRIVE
SAINT CLOUD, FL 34772 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: CHANCY SUMMERS

05/14/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CUNNINGHAM, BRUCE
Address: 4104 BOB WHITE CT
City-St-Zip: SAINT CLOUD, FL 34772

Title: TD () Delete
Name: CHANDLER, JAMIE
Address: 2972 MICAH CT
City-St-Zip: SAINT CLOUD, FL 34772

Title: DV () Delete
Name: STEINMETZ, RICHARD
Address: 313 COLUMBIA AVE
City-St-Zip: SAINT CLOUD, FL 34769

Title: DS () Delete
Name: STANFORD, CRYSTI
Address: 3220 PACKAR AVE
City-St-Zip: SAINT CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SUMMERS, CHANCY L
Address: 4150 OAKWOOD DRIVE
City-St-Zip: SAINT CLOUD, FL 34772

Title: TD (X) Change () Addition
Name: STANFORD, CRYSTI
Address: 3220 PACKARD AVENUE
City-St-Zip: SAINT CLOUD, FL 34772

Title: VP (X) Change () Addition
Name: STEINMETZ, RICHARD
Address: 313 COLUMBIA AVE
City-St-Zip: SAINT CLOUD, FL 34769

Title: SD (X) Change () Addition
Name: KERLEY, VICKI
Address: 2340 ELDORADO CT.
City-St-Zip: SAINT CLOUD, FL 34772

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: CHANCY SUMMERS

PD

05/14/2007

Electronic Signature of Signing Officer or Director

Date