2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N22528

Entity Name: ASSOCIATION OF CHRISTIAN YOUTH SPORTS INC.

Current Principal Place of Business:

1191 LEATHERWOOD DR
ALTAMONTE SPRINGS, FL 32714 US

New Principal Place of Business:

Current Mailing Address:

380 SOUTH S.R. 434
STE 1004-275
ALTAMONTE SPRINGS, FL 32714 US

New Mailing Address:

FEI Number: 59-2849777 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAENERS, KENNETH F
1191 LEATHERWOOD DR
ALTAMONTE SPRINGS, FL 32714 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:	SD	( ) Delete
Name:	CAENERS, BETTE-SUE	
Address:	1191 LEATHERWOOD DR	
City-St-Zip:	ALTAMONTE SPRING, FL 32714	
Title:	PD	( ) Delete
Name:	CAENERS, KENNETH F	
Address:	1191 LEATHERWOOD DR	
City-St-Zip:	ALTAMONTE SPRING, FL 32714	
Title:	D	( ) Delete
Name:	BLAKEMORE, TIMOTHY E	
Address:	451 NW 58TH STREET	
City-St-Zip:	GAINESVILLE, FL 32607	
Title:	TD	( ) Delete
Name:	HAECKER, MARK	
Address:	5009 CUB LAKE DRIVE	
City-St-Zip:	APOPKA, FL 32703	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK HAECKER TD 04/29/2005

Electronic Signature of Signing Officer or Director Date