

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22528

FILED
May 04, 2007
Secretary of State

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 ()**
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:

Name and Address of New Registered Agent:

CAENERS, KENNETH F
1191 LEATHERWOOD DR
ALTAMONTE SPRINGS, FL 32714 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: _____

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: VPD () Delete
Name: HAECKER, MARK P
Address: 5009 CUB LAKE DRIVE
City-St-Zip: APOPKA, FL 32703

Title: TD () Delete
Name: HAECKER, WENDE
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 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: WENDE HAECKER

TD

05/04/2007

Electronic Signature of Signing Officer or Director

Date