

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 14, 2009  
Secretary of State**

DOCUMENT# N24336

Entity Name: EAST MARION ATHLETIC ASSOCIATION, INC.

**Current Principal Place of Business:**

14445 NE 1ST RD  
SILVER SPRINGS, FL 34488 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2292  
SILVER SPRINGS, FL 34489 US

**New Mailing Address:**

FEI Number: 59-2773761      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MICHEWICZ, BEVIN  
13954 NE 46TH ST  
SILVER SPRINGS, FL 34488 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: PRES ( ) Delete  
Name: MICHEWICZ, HUNTER  
Address: 13954 NE 46TH ST  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: VP ( ) Delete  
Name: BRITT, GENE  
Address: 2276 NE 145TH AVE RD  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: TRES ( ) Delete  
Name: SCHMITT, MARGARET  
Address: 1109 SE 178TH AVE  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: SEC ( ) Delete  
Name: RHODEN, BRENDA  
Address: 15157 NE 85 LANE  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: DIR ( ) Delete  
Name: LARRAMORE, CAROL  
Address: 16612 NE 58TH ST  
City-St-Zip: SILVER SPRINGS, FL 34488

Title: DIR ( ) Delete  
Name: BRITT, JAMIE  
Address: 16608 NE 58TH ST  
City-St-Zip: SILVER SPRINGS, FL 34488

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TRES (X) Change ( ) Addition  
Name: MICHEWICZ, HUNTER  
Address: 93154 NE 46TH ST  
City-St-Zip: SILVER SPRINGS, FL 34488

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: HUNTER MICHEWICZ

PRES

07/14/2009

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

\_\_\_\_\_  
Date