

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26384

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** OVIEDO LIONS YOUTH FOOTBALL CLUB, INC.

**Current Principal Place of Business:**

890 WORTHINGTON CT.  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 620758  
OVIEDO, FL 327620758 US

**New Mailing Address:**

**FEI Number:** 59-2885941

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATTEN, ALAN  
890 WORTHINGTON CT.  
OVIEDO, FL 32765 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: COMM  
Name: GIBSON, SAMMY  
Address: P.O. BOX 620758  
City-St-Zip: OVIEDO, FL 327620758 US

Title: PRES  
Name: GIRARD, JOHN  
Address: P.O. BOX 620758  
City-St-Zip: OVIEDO, FL 327620758 US

Title: TREA  
Name: PATTEN, ALAN  
Address: P.O. BOX 620758  
City-St-Zip: OVIEDO, FL 327620758 US

Title: SEC  
Name: DAVIS, ZEPHYR  
Address: P.O. BOX 620758  
City-St-Zip: OVIEDO, FL 327620758 US

Title: MGR.  
Name: BARBARA, DAN  
Address: P.O. BOX 620758  
City-St-Zip: OVIEDO, FL 327620758 US

Title: CORD  
Name: PERNAL, PATRICIA  
Address: P.O. BOX 620758  
City-St-Zip: OVIEDO, FL 327620758 US

I hereby 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 all other like empowered.

SIGNATURE: PATRICIA PERNAL

CORD

04/23/2012

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

\_\_\_\_\_  
Date