

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29535

FILED
Mar 04, 2009
Secretary of State

Entity Name: MARION COUNTY YOUTH FOOTBALL LEAGUE, INC.

Current Principal Place of Business:

2200 S.E. 36TH AVE.
OCALA, FL 34471 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5489
OCALA, FL 34478 US

New Mailing Address:

FEI Number: 59-1685591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHWING, LOIS
3848 SE 15TH ST
OCALA, FL 34471 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: PD () Delete
Name: JONES, KENNY
Address: 13988 S.E. 176TH PLACE
City-St-Zip: WEIRSDALE, FL 34472

Title: VD () Delete
Name: PAQUIN, GREG
Address: 22939 N.E. 114TH AVE.
City-St-Zip: ORANGE SPRINGS, FL

Title: STD () Delete
Name: SCHWING, LOIS
Address: 3848 S.E. 15TH ST.
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: MYERS, KYLE
Address: 3325 S.E. 15TH STREET
City-St-Zip: OCALA, FL 34471

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: LOIS J. SCHWING

STD

03/04/2009

Electronic Signature of Signing Officer or Director

Date