


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State

04-22-2005 90288 029 ****61.25

DOCUMENT # N31430 1. Entity Name AVON PARK YOUTH FOOTBALL, INC.					
Principal Place of Business P.O. BOX 218 AVON PARK, FL 33825 US			Mailing Address P.O. BOX 218 AVON PARK, FL 33825 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2381111	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JACKSON, MELANIE 2467 W. RAVEN RD. AVON PARK, FL 33825				7. Name and Address of New Registered Agent Name Shannon Hendrix Street Address (P.O. Box, Number is Not Acceptable) 2 Forest Hills Drive City Avon Park FL Zip Code 33825	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Shannon D Hendrix</u> 4-18-05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENDRIX, SHANNON P.O. BOX 1075 AVON PARK, FL 33825	<input type="checkbox"/> Delete		TITLE P NAME STREET ADDRESS CITY-ST-ZIP	PM Hendrix, Shannon 2 Forest Hills Drive Avon Park, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WASHINGTON, RAMONA 2063 N. SAGINAW RD. AVON PARK, FL 33825	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PM JACKSON, MELANIE 2467 W RAVEN RD. AVON PARK, FL 33825	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Dick, Richard 2000 Morningside Road Avon Park, FL 33825
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KIRK, GLORIA 3080 W. RENSEN RD AVON PARK, FL 33825	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Kremnitzer Wendy 841 Fielder Blvd Sebring, FL 33870
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C JACKSON, WADE 2467 W. RAVEN RD AVON PARK, FL 33825	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Bronstein, Kim 3315 E Avon Pinos Road Avon Park, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C SULLIVAN, NORISSA 2382 CAMELTO RD AVON PARK, FL 33825	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Dick, Pam 2000 Morningside Road Avon Park, FL 33825
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Shannon D Hendrix 4-18-05 843-443-0984 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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