


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 26, 2007 8:00 am**  
**Secretary of State**

02-26-2007 90073 050 \*\*\*\*61.25

<b>DOCUMENT # N31799</b> 1. Entity Name <b>FT. MYERS POLICE ATHLETIC LEAGUE, INC.</b>					
Principal Place of Business <b>2210 PECK STREET FORT MYERS FL 33901</b>			Mailing Address <b>851 MARSH AVE FORT MYERS FL 33905 US</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-0118480</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				1st MOORE CR2E037 (10/06)	
6. Name and Address of Current Registered Agent  <b>WESLEY, WALT 851 MARSH AVE FORT MYERS FL 33905</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b> Zip Code</span>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
<b>FILE NOW: FEE IS \$61.25 Due By May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make Check Payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD <input type="checkbox"/> Delete <b>BROWN, CHARLES E 851 MARSH AVE FORT MYERS FL 33905</b>		TITLE NAME STREET ADDRESS CITY- ST- ZIP	Lt. MELVIN PERRY <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>851 MARSH AVE. FORT MYERS, FL 33905</b>	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	TSD <input type="checkbox"/> Delete <b>MILLER, DAVE 851 MARSH AVE FORT MYERS FL 33905</b>		TITLE NAME STREET ADDRESS CITY- ST- ZIP	AUDENIA THOMAS <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>851 MARSH AVE. FORT MYERS, 33905</b>	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD <input type="checkbox"/> Delete <b>SKIDELSKI, SHELLY 851 MARSH AVE. FORT MYERS FL 33905</b>		TITLE NAME STREET ADDRESS CITY- ST- ZIP	Lt. CHARLES BORNES <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>851 MARSH AVE. FORT MYERS, FL 33905</b>	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	SECRETARY <input type="checkbox"/> Change <input type="checkbox"/> Addition <b>ANGELA ORSELLI 851 MARSH AVE. FORT MYERS, FL 33905</b>	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<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	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:** Walt Wesley 02/09/07 (239) 693-1246  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #