## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N32203

Jan 27, 2008 Secretary of State

Entity Name: NORTHEAST BANDITS YOUTH FOOTBALL, INC.

**Current Principal Place of Business: New Principal Place of Business:** 5840 16TH ST. N. ST PETERSBURG, FL 33703 LIS **Current Mailing Address: New Mailing Address:** P.O. BOX 56453 ST PETERSBURG, FL 33732 US FEI Number: 59-2949316 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARBER, TANYA J 2869 52ND WAY NORTH US SAINT PETERSBURG, FL 33710 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition WOLLNER, DAVID BARBER, TANYA J Name: Name: 1819 SHORE ACRES BLVD NE Address: 2869 52ND WAY NORTH Address: City-St-Zip: ST PETERSBURG, FL 33703 US City-St-Zip: ST PETERSBURG, FL 33710 US Title: Title: (X) Change ( ) Addition ( ) Delete BARBER, TANYA J Name: RIVERA, TONYA R Name: Address: 2869 52ND WAY NORTH Address: 6281 104TH AVENUE City-St-Zip: SAINT PETERSBURG, FL 33710 US City-St-Zip: PINELLAS PARK, FL US Title: VPO () Delete Title: () Change () Addition

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Title: () Delete Name: SHIPLEY, BETH A

1858 MONTANA AVENUE NE

ST PETERSBURG, FL 33703 US

4682 56TH AVENUE NORTH Address:

EMLEY, JOEL

Name:

Address:

City-St-Zip:

City-St-Zip: ST PETERSBURG, FL 33714 US

Title: () Delete Title: (X) Change ( ) Addition

PETERSON, TAMI SCHRAGE, JOSEPH E Name: Name: 6377 13TH AVENUE N 1044 MARCO DR N.E. Address: Address:

ST PETERSBURG, FL 33702 US City-St-Zip: ST PETERSBURG, FL 33710 US 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: TANYA BARBER **PRES** 01/27/2008

() Change () Addition