FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 15 AM 10:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N33092 (0)

1. Corporation Name
LAKE MARY YOUTH FOOTBALL ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P.O. BOX 520641 LONGWOOD FL 32752-0641	P.O. BOX 520641 LONGWOOD FL 32752-0641

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/30/1989
3a. Date of Last Report: 05/01/1994
4. FEI Number: 52-1656189 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 PO BOX 951901	26 PO BOX 951901
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: LAKE MARY, FLA	28 City & State: LAKE MARY, FLA
24 Zip: 32795 25 Country: USA	29 Zip: 32795 30 Country: USA

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

HERRING, ALLIN
505 LAKESHORE DRIVE
LAKE MARY FL 32708

10. Name and Address of New Registered Agent

81 Name: ED HOOK JR
82 Street Address (P.O. Box Number is Not Acceptable): 113 TIPPERARY DR
83
84 City: LAKE MARY FL 85 Zip Code: 32746

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: ED HOOK DIRECTOR — 5/6/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	HORWATH, SUE	1.2 NAME	
STREET ADDRESS	465 LAKESHORE DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE MARY FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	D ☑ Change ☐ Addition
NAME	WILKINSON, ROBERT L JR.	2.2 NAME	ED HOOK JR
STREET ADDRESS	529 MOURNING DOVE CIR	2.3 STREET ADDRESS	113 TIPPERARY DR
CITY-ST-ZIP	LAKE MARY FL	2.4 CITY-ST-ZIP	LAKE MARY, FLA 32746
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	NUNIZIATA, SAL	3.2 NAME	
STREET ADDRESS	1833 ALAQUA DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	LONGWOOD FL	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	D ☑ Change ☐ Addition
NAME	CARDETTI, EDGARDO G	4.2 NAME	TARA CHAMBERLAIN
STREET ADDRESS	109 WINDMILL WAY	4.3 STREET ADDRESS	556 HOLBROOK CIR
CITY-ST-ZIP	LONGWOOD FL 32750	4.4 CITY-ST-ZIP	LAKE MARY, FLA 32746
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ED HOOK DIRECTOR — 3/6/95 — 4073395101
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0031020