04211999-90206-030-$61.25-$61.25

**FILED**
**Apr 21, 1999 8:00 am**
**Secretary of State**
04-21-1999 90206 030 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT
**1999**

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

# DOCUMENT # N33092

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

| Principal Place of Business | Mailing Address |
|---|---|
| P O BOX 951901<br>LAKE MARY FL 32795<br>US | P O BOX 951901<br>LAKE MARY FL 32795<br>US |

| 2. Principal Place of Business | 2a. Mailing Address | 3. Date Incorporated or Qualified |
|---|---|---|
| 21 | 26 | 06/30/1989 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 | 4. FEI Number 52-1656189 ☐ Applied For ☐ Not Applicable |
| City & State 23 | City & State 28 | 5. Certificate of Status Desired ☐ $8.75 Additional Fee Required |
| Zip 24 Country 25 | Zip 29 Country 30 | 6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees |

**9. Name and Address of Current Registered Agent**

HOOK, ED JR
113 TIPPERARY DR
LAKE MARY FL 32746

**10. Name and Address of New Registered Agent**

81 Name: Luther Holley
82 Street Address (P.O. Box Number is Not Acceptable): 504 Serenity Place
83: Lake Mary
84 City: Lake Mary FL 85 Zip Code: 32746

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Luther Holley — Luther Holley — DATE: 4/16/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>TOOLE, ANGELA<br>169 CLYDE AVE<br>LONGWOOD FL 32750 | ☒ DELETE | 1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP | (D)<br>Secretary<br>Jenni Heiselman<br>537 Ridgeline Run<br>Longwood, FL 32750 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>COATES, MIKE<br>215 SLADE LN<br>LONGWOOD FL 32750 | ☒ DELETE | 2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP | (D)<br>Business manager<br>Wendi Humble<br>895 Silverado Ct.<br>Lake Mary, FL 32746 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>MANISCALCO, DOUGLAS<br>404 N SUNDANCE DR<br>LAKE MARY FL | ☒ DELETE | 3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP | (D)<br>Treasurer<br>Donna Duffy<br>895 Bucksaw PL<br>Longwood, FL 32750 | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ DELETE | 6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP | | ☐ Change ☐ Addition |

14. 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 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, with all other like empowered.

**SIGNATURE:** SIGNATURE REQUIRED — Donna Duffy — 4/14/99 — (407) 328-9008
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (1/1/98)