

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35169

FILED
Apr 29, 2009
Secretary of State

Entity Name: HOLLYWOOD OPTIMIST FOOTBALL LEAGUE, INC.

Current Principal Place of Business:

16850 NW 33RD CT
OPA LOCKA, FL 33056 US

New Principal Place of Business:

Current Mailing Address:

16850 NW 33RD CT
OPA LOCKA, FL 33056 US

New Mailing Address:

FEI Number: 65-0213270

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KINGCADE, CARL J
17455 SW 33RD CT
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

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:

Title: T () Delete
Name: KINGCADE, CARL
Address: 12455 NW 33RD CT
City-St-Zip: MIRAMAR, FL 33029 US

Title: P () Delete
Name: SPIVEY, MICHAEL L
Address: 16850 NW 33RD CT
City-St-Zip: MIAMI GARDENS, FL 33056

Title: DVP () Delete
Name: SPIVEY, MICHAEL L
Address: 16920 NW 33 AVENUE
City-St-Zip: CAROL CITY, FL 33056

Title: DST () Delete
Name: ROLLE, ANGELA
Address: 190 NE 213 ST
City-St-Zip: MIAMI, FL 33179

Title: VP (X) Delete
Name: BROWN, AL
Address: 4445 NW 41ST TERRACE
City-St-Zip: LAUDERDALE LAKES, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DVP (X) Change () Addition
Name: BROWN, AL
Address: 4445 NW 41 STREET
City-St-Zip: LAUDERDALE LAKES, FL 33319

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CARL J. KINGCADE

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date