


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90379 015 ****61.25

DOCUMENT # N35227 1. Entity Name MIRAMAR POLICE ATHLETIC LEAGUE, INC.					
Principal Place of Business 8915 MIRAMAR PKWY. MIRAMAR, FL 33025			Mailing Address PO BOX 277715 MIRAMAR, FL 33027 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SINGLETON, THERESA 1966 SW 94TH AVENUE MIRAMAR, FL 33025				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	ED	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERTSON, WILLIAM		NAME	Kim Burgess	
STREET ADDRESS	8915 MIRAMAR PKWY		STREET ADDRESS	9800 NW 11 Street	
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP	Plantation, FL 33322	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MACK, TYMIRA		NAME	Gayle Wilsmann	
STREET ADDRESS	4131 SW 27TH		STREET ADDRESS	2231 NW 102 Ave	
CITY-ST-ZIP	HOLLYWOOD, FL 33023		CITY-ST-ZIP	Pembroke Pines, FL 33026	
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MINER, JOANNE		NAME		
STREET ADDRESS	12004 MIRAMAR PKWY		STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP		
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ROOTH, DONNA		NAME		
STREET ADDRESS	12555 ORANGE DRIVE		STREET ADDRESS		
CITY-ST-ZIP	DAVIE, FL 33330		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GILHAULY, RICHELLE		NAME		
STREET ADDRESS	8915 MIRAMAR PARKWAY		STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SINGLETON, THERESA		NAME		
STREET ADDRESS	1966 94TH AVE.		STREET ADDRESS		
CITY-ST-ZIP	MIRAMAR, FL 33025		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Kimberly A. Burgess</i>			<i>April 28, 2006</i> 954-804-4845 Date Daytime Phone #		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

ATTACHMENT

40074662

Adendum to:
2006 Annual Not for Profit Corporation
Document #N35227

The following Officers and Directors will be deleted:

Delete

Title	ED
Name	Darren Kiley
Street Address	638 SW 106th Avenue
City-St-Zip	Pembroke Pines, FL 33025

Delete

Title	D
Name	Kennett, Timothy
Street Address	244 Maple Terrace
City-St-Zip	Davie, FL 33325