

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37026

FILED  
Apr 16, 2010  
Secretary of State

**Entity Name:** ISLE OF EIGHT FLAGS POLICE ATHLETIC LEAGUE, INC.

**Current Principal Place of Business:**

1525 LIME STREET  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 774  
FERNANDINA BEACH, FL 32035

**New Mailing Address:**

**FEI Number:** 59-3070813

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

JOHNSON, SHAWN L  
1525 LIME STREET  
FERNANDINA BEACH, FL 32034 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: BMT  
Name: SMITH, JUNE  
Address: P O BOX 591  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: BMT  
Name: WILLIAMS, LAVINIA  
Address: 1016 CEDAR ST  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: BMT  
Name: ALBERT, CHARLES  
Address: 612 S 11TH STREET  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: P  
Name: JOHNSON, SHAWN  
Address: 1525 LIME STREET  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: BMT  
Name: YOKLEY, MATTIE  
Address: 1223 TURTLE CREEK DR N  
City-St-Zip: JACKSONVILLE, FL 32218

I hereby 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 all other like empowered.

SIGNATURE: SHAWN L. JOHNSON

P

04/16/2010

Electronic Signature of Signing Officer or Director

Date