

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39880

FILED
Jan 16, 2007
Secretary of State

Entity Name: SOUTHEAST FOOTBALL OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:

1336 SHERMAN AVE
PANAMA CITY, FL 32401 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 36241
PANAMA CITY, FL 32401 US

New Mailing Address:

FEI Number: 59-3025075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OGLESBY, JACK
329 N. BONITA AVE
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

MELTON, BILL
102 SANTEE DR
PANAMA CITY, FL 32404 US

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: BILL MELTON

01/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KASPAR, TOM
Address: 4133 DANNY DRIVE
City-St-Zip: PANAMA CITY, FL 32408

Title: VD () Delete
Name: INMAN, DON
Address: 2016 GECATO LANE
City-St-Zip: PANAMA CITY, FL 32444

Title: S () Delete
Name: OGLESBY, JACK
Address: 329 N BONITA AVE
City-St-Zip: PANAMA CITY, FL 32401

Title: T () Delete
Name: GOODMAN, GERALD
Address: 4356 CAREY BLVD
City-St-Zip: CHIPLEY, FL 32428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MELTON, BILL
Address: 102 SANTEE DR
City-St-Zip: PANAMA CITY, FL 32404

Title: VP (X) Change () Addition
Name: GOODMAN, GERALD
Address: 4356 CAREY BLVD
City-St-Zip: CHIPLEY, FL 32428

Title: S (X) Change () Addition
Name: SAAS, BEN
Address: P.O. BOX 15574
City-St-Zip: PANAMA CITY, FL 32406

Title: T (X) Change () Addition
Name: WILLIAMS, ED
Address: 850 874-1825
City-St-Zip: PANAMA CITY, FL 32404

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD WILLIAMS

T

01/16/2007

Electronic Signature of Signing Officer or Director

Date