

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40349

FILED  
Apr 11, 2006  
Secretary of State

**Entity Name:** GULF COAST MIDGET FOOTBALL LEAGUE, INC.

**Current Principal Place of Business:**

POST OFFICE BOX 938  
PANAMA CITY, FL 324020938

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 938  
PANAMA CITY, FL 324020938

**New Mailing Address:**

**FEI Number:** 59-6173183

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CREEL, HAROLD M  
3117 EAST 3RD STREET  
PANAMA CITY, FL 32401 US

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

MANIS, GLENN  
PO BOX 938  
PANAMA CITY, FL 32402 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: GULF COAST MIDGET FOOTBALL LEAGUE

04/11/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CREEL, HAROLD  
Address: 3117 EAST 3RD STREET  
City-St-Zip: PANAMA CITY, FL 32401

Title: V ( ) Delete  
Name: MANIS, GLEN  
Address: PO BOX 938  
City-St-Zip: PANAMA CITY, FL 32402

Title: T ( ) Delete  
Name: BROOKS, ROBERT  
Address: 210 SAGO PALM ST  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: R-CC ( ) Delete  
Name: JOHNSON, DARRELL  
Address: PO BOX 938  
City-St-Zip: PANAMA CITY, FL 32402

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MANIS, GLENN  
Address: PO BOX 938  
City-St-Zip: PANAMA CITY, FL 32402

Title: V (X) Change ( ) Addition  
Name: GEANNE, SIMCOX  
Address: PO BOX 938  
City-St-Zip: PANAMA CITY, FL 32402

Title: S (X) Change ( ) Addition  
Name: BRANNON, TRACY  
Address: PO BOX 938  
City-St-Zip: PANAMA CITY, FL 32402

Title: T (X) Change ( ) Addition  
Name: BROOKS, ROBERT  
Address: PO BOX 938  
City-St-Zip: PANAMA CITY, FL 32402

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: ROBERT BROOKS

T

04/11/2006

Electronic Signature of Signing Officer or Director

Date