2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# N46305

Entity Name: LAKE REGION FOOTBALL OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:

225 AUDUBON OAKS DRIVE
APT #203
LAKELAND, FL 33809

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8766
LAKELAND, FL 33806

New Mailing Address:

FEI Number: 59-3075585 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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:	D	( ) Delete
Name:	GARRISON, ANDREW	
Address:	2953 MORRIS DR	
City-St-Zip:	BARTOW, FL 33830	
Title:	P	( ) Delete
Name:	DUFFY, DENNIS	
Address:	10820MHIGHVIEW DR	
City-St-Zip:	DADE CITY, FL 33525	
Title:	D	( ) Delete
Name:	HARPER, TIM	
Address:	2224 PALMVIEW CIR E	
City-St-Zip:	AUBURNDALE, FL 33823	
Title:	D	( ) Delete
Name:	FOUNTAIN, JOE	
Address:	6010N IDLE A WHILE CR.	
City-St-Zip:	DADE CITY, FL 33523	
Title:	D	( ) Delete
Name:	GALYAN, JOE JR	
Address:	4611 CT ST	
City-St-Zip:	ZEPHYRHILLS, FL 33541	
Title:	D	( ) Delete
Name:	YODONIS, FRANK	
Address:	PO BOX 351	
City-St-Zip:	FROSTPROOF, FL 33843	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	SCHULTZ, LEROY	
Address:	410 SANGRIA DRIVE	
City-St-Zip:	VALRICO, FL 33594	
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: ROBERT GRECO T 04/15/2009

Electronic Signature of Signing Officer or Director — Date