

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50195

FILED
Jan 16, 2007
Secretary of State

Entity Name: THE HISTORIC ST. JOHNS COUNTY POLICE ATHLETIC LEAGUE, INC.

Current Principal Place of Business:

4015 LEWIS SPEEDWAY
ST AUGUSTINE, FL 32095

New Principal Place of Business:

Current Mailing Address:

4015 LEWIS SPEEDWAY
ST AUGUSTINE, FL 32095

New Mailing Address:

FEI Number: 59-3169967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, TONY
4015 LEWIS SPEEDWAY
ST AUGUSTINE, FL 32095 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: RAMSEY, TYRONE
Address: 40 ORANGE ST.
City-St-Zip: ST. AUGUSTINE, FL 32055

Title: PD () Delete
Name: WILLIAMS, CYNTHIA
Address: 400 E. HARRIS ST
City-St-Zip: HASTINGS, FL 32145

Title: DS () Delete
Name: HOOD, LINDA
Address: 40 ORANGE ST
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: DT () Delete
Name: BLEVINS, TROY
Address: 901 POPE RD.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: D () Delete
Name: ACOSTA, CHRIS
Address: 4015 LEWIS SPEEDWAY
City-St-Zip: ST. AUGUSTINE, FL 32095

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: TARBERT, DAVID
Address: 4015 LEWIS SPEEDWAY
City-St-Zip: ST. AUGUSTINE, FL 32095

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: DAVID TARBERT

SGT

01/16/2007

Electronic Signature of Signing Officer or Director

Date