

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50720

FILED
Mar 16, 2009
Secretary of State

Entity Name: SUNSHINE FOOTBALL OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:

1450 CAROLYN WAY
CLEARWATER, FL 33755 US

New Principal Place of Business:

731 PATRICIA AVE
DUNEDIN, FL 34698 US

Current Mailing Address:

PO BOX 5302
CLEARWATER, FL 33758 US

New Mailing Address:

FEI Number: 59-3143991 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRY, JOSEPH M
4978 KERNWOOD COURT
PALM HARBOR, FL 34685 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: P () Delete
Name: BATES, ED
Address: 1450 CAROLYN WAY
City-St-Zip: CLEARWATER, FL 33755

Title: VP () Delete
Name: BARBER, DAVID
Address: 2160 OAK GROVE DR
City-St-Zip: CLEARWATER, FL 33764

Title: S () Delete
Name: REDMOND, DICK
Address: 2430 BRAZILIA DRIVE # 30
City-St-Zip: CLEARWATER, FL 33763

Title: T () Delete
Name: SULLIVAN, ED B III
Address: 420 GULF BLVD. # 505
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: D () Delete
Name: GLENN, RAY
Address: 7000 10TH ST N
City-St-Zip: ST PETERSBURG, FL 33702

Title: D () Delete
Name: HELMS, RANDY
Address: 9641 105TH AVE N
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLANTON, MIKE
Address: 731 PATRICIA AVE
City-St-Zip: DUNEDIN, FL 34698

Title: VP (X) Change () Addition
Name: WERTON, DANNY
Address: 14040 WATERVILLE CIR.
City-St-Zip: TAMPA, FL 33626

Title: S (X) Change () Addition
Name: DEVRIES, WALLACE
Address: 901 BOUGH AVE
City-St-Zip: CLEARWATER, FL 33760

Title: T (X) Change () Addition
Name: SULLIVAN, ED B III
Address: 2269 MACKENZIE COURT
City-St-Zip: CLEARWATER, FL 33765

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: ED B. SULLIVAN III

T

03/16/2009

Electronic Signature of Signing Officer or Director

Date