


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90022 049 ****61.25

DOCUMENT # N93000000287 1. Entity Name BAYOU GEORGE ATHLETIC ASSOCIATION INC.					
Principal Place of Business 6010 JAYCEE DRIVE (BALL PARK) YOUNGSTOWN, FL 32466			Mailing Address PO BOX 1005 YOUNGSTOWN, FL 32466		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2440058	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent WINTER, JAY 4919 PALM AVE YOUNGSTOWN, FL 32466				7. Name and Address of New Registered Agent Name Neta Cauley Street Address (P.O. Box Number is Not Acceptable) 6722 Northwood St City Youngstown FL Zip Code 32466	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Neta Cauley + Neta Cauley 1-29-2005 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when amending) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WINTER, JAY 4919 PALM AVE YOUNGSTOWN, FL 32466	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Neta Cauley 6722 Northwood St. Youngstown FL 32466	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CAULEY, NETA 6722 NORTH WOOD ST YOUNGSTOWN, FL 32466	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Greg Pippin 17639 Roll-O-Home Rd Fountain FL 32438	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD YOUNG, DANA 4930 PINE AVE YOUNGSTOWN, FL 32466	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Kim Welch 6741 Waverly St. Youngstown FL 32466	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MEEKS, CAROL 13721 MASHBURN RD. YOUNGSTOWN, FL 32466	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Sandi Gay 4130 Breezy Lane Youngstown FL 32466	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Neta Cauley Neta Cauley 1-29-2005 850-784-1754 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

40010052



01272005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2440058

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WINTER, JAY
4919 PALM AVE
YOUNGSTOWN, FL 32466

7. Name and Address of New Registered Agent

Name **Neta Cauley**
 Street Address (P.O. Box Number is Not Acceptable) **6722 Northwood St**
 City **Youngstown** FL Zip Code **32466**

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SIGNATURE **Neta Cauley** + **Neta Cauley** 1-29-2005
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**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
WINTER, JAY
4919 PALM AVE
YOUNGSTOWN, FL 32466

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
CAULEY, NETA
6722 NORTH WOOD ST
YOUNGSTOWN, FL 32466

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
YOUNG, DANA
4930 PINE AVE
YOUNGSTOWN, FL 32466

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
MEEKS, CAROL
13721 MASHBURN RD.
YOUNGSTOWN, FL 32466

☒ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

President
Neta Cauley
6722 Northwood St.
Youngstown FL 32466

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Vice President
Greg Pippin
17639 Roll-O-Home Rd
Fountain FL 32438

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Secretary
Kim Welch
6741 Waverly St.
Youngstown FL 32466

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Treasurer
Sandi Gay
4130 Breezy Lane
Youngstown FL 32466

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

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SIGNATURE: **Neta Cauley** **Neta Cauley** 1-29-2005 850-784-1754
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #