2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000561

FILED Feb 01, 2007 Secretary of State

Entity Name: APOPKA YOUTH SPORTS ASSOCIATION, INCORPORATED

Current Principal Place of Business: New Principal Place of Business: ROBERT M. MANLEY, JR. 555 MARTIN STREET APOPKA, FL 32712 **New Mailing Address: Current Mailing Address:** P.O. BOX 1093 APOPKA, FL 32704 US FEI Number: 23-1582287 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SPEK, MELISSA SPEK, MELISSA 344 SPEYSIDE LANE P.O. BOX 1093 APOPKA, FL 32712 APOPKA, FL 32712 US 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: M. SPEK 02/01/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Delete () Change () Addition MANLEY, ROBERT M JR Name: Name: 555 LAKE MCCOY DRIVE Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: Title: () Delete () Change () Addition SPANN, JULIE Name: Name: Address: 649 MT. STERLING AVENUE Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: SECR () Delete Title: () Change () Addition SUGGS, STEFANIE Name: Name: 3918 KILMARNOCK DRIVE Address: Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: TREA () Delete Title: () Change () Addition Name: SPEK, MELISSA Name: Address: 344 SPEYSIDE LANE Address: City-St-Zip: APOPKA, FL 32712 City-St-Zip: Title: DF DF () Delete Title: (X) Change () Addition MUTTERS, KEITH MULEY, ROBB Name: Name: 745 FERN COURT 444 DOMINISH ESTATES DRIVE Address: Address: City-St-Zip: APOPKA, FL 32703 City-St-Zip: APOPKA, FL 32712 Title: () Delete Title: () Change () Addition OKEY, ANNETTE Name: Name: Address: 3206 PLYMOUTH SORRENTO ROAD Address: APOPKA, FL 32712 City-St-Zip: City-St-Zip:

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: M. SPEK TREA 02/01/2007