

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000561

FILED  
Jan 15, 2010  
Secretary of State

**Entity Name:** APOPKA YOUTH SPORTS ASSOCIATION, INCORPORATED

**Current Principal Place of Business:**

ROBERT M. MANLEY, JR.  
555 LAKE MCCOY DRIVE  
APOPKA, FL 32712 US

**New Principal Place of Business:**

AYSA  
3910 JASON DWELLEY PARKWAY  
APOPKA, FL 32712 US

**Current Mailing Address:**

P.O. BOX 1093  
APOPKA, FL 32704 US

**New Mailing Address:**

**FEI Number:** 23-1582287

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MIELE, LISA  
1874 GRASMERE DR  
APOPKA, FL 32703 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:** PRES  
**Name:** MUTTERS, KEITH  
**Address:** 745 FERN COURT  
**City-St-Zip:** APOPKA, FL 32703

**Title:** VP  
**Name:** MANLEY, ROBERT  
**Address:** 555 LAKE MCCOY DR  
**City-St-Zip:** APOPKA, FL 32712

**Title:** SECR  
**Name:** SANDERS, STACEY  
**Address:** 1711 HIDDENWOOD COURT  
**City-St-Zip:** APOPKA, FL 32712

**Title:** TREA  
**Name:** MIELE, LISA  
**Address:** 1874 GRASMERE DRIVE  
**City-St-Zip:** APOPKA, FL 32703

**Title:** DF  
**Name:** BROWN, TOM  
**Address:** 706 BROOK FOREST COURT  
**City-St-Zip:** APOPKA, FL 32712

**Title:** DC  
**Name:** EDWARDS, CINDY  
**Address:** 1483 COUNTRY MANSION COURT  
**City-St-Zip:** APOPKA, FL 32703

I hereby 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 all other like empowered.

**SIGNATURE:** LISA MIELE

TREA

01/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date