

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002536

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: PEACE RIVER YOUTH SOCCER ASSOCIATION, INC.

**Current Principal Place of Business:**

895 OAKWOOD LOOP, SOUTH  
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 186  
BARTOW, FL 338310186 US

**New Mailing Address:**

FEI Number: 59-3228400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MAGNETICO, SAL  
895 OAKWOOD LOOP, SOUTH  
BARTOW, FL 33830 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: VD ( ) Delete  
Name: BUTLER, JOEL D  
Address: P. O. BOX 186  
City-St-Zip: BARTOW, FL 33831

Title: VD ( ) Delete  
Name: DENEVE, MICHAEL J  
Address: 2065 E. CHEROKEE  
City-St-Zip: BARTOW, FL

Title: VD ( ) Delete  
Name: CRUM, GREGORY R  
Address: 4916 IRONWOOD TR.  
City-St-Zip: BARTOW, FL

Title: TD ( ) Delete  
Name: BUTLER, VALERIE  
Address: P.O. BOX 186 N/A  
City-St-Zip: BARTOW, FL 33831

Title: PD ( ) Delete  
Name: CRIBB, WILLIAM  
Address: 4910 IRONWOOD TR  
City-St-Zip: BARTOW, FL 33830

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: VALERIE B. BUTLER

TD

04/30/2004

Electronic Signature of Signing Officer or Director

Date