

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003641

FILED  
Apr 17, 2007  
Secretary of State

**Entity Name:** NORTHEAST REBELS FOOTBALL CLUB, INC.

**Current Principal Place of Business:**

4891 NE 2ND AVE  
FT LAUDERDALE, FL 33334 US

**New Principal Place of Business:**

**Current Mailing Address:**

1020 SE 9TH AVE.  
POMPANO BEACH, FL 33060 US

**New Mailing Address:**

**FEI Number:** 65-0479441      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MITCHELL, CAROL  
1020 SE 9TH AVENUE  
POMPANO BEACH, FL 33060 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: FVPD ( ) Delete  
Name: CHEVY, JOE  
Address: 551 BAHAMA LANE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: SVPD ( ) Delete  
Name: STOKES, BARBARA  
Address: 4201 NE 1ST AVE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: S ( ) Delete  
Name: GUY, STACY  
Address: 4201 NE 1ST AVE  
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: PD (X) Delete  
Name: GROVER, TONY  
Address: 1061 NE 23 TERR APT 5  
City-St-Zip: FT LAUDERDALE, FL 33062

Title: T (X) Delete  
Name: MITCHELL, CAROL  
Address: 1020 SE 9TH AVE.  
City-St-Zip: POMPANO BEACH, FL 33060

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CHEVY, JOE  
Address: 222 BOMBAY AVENUE  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: S (X) Change ( ) Addition  
Name: DIMARCO, MARY  
Address: 6820 NW 31 WAY  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: T (X) Change ( ) Addition  
Name: VIRGINIA, DAY  
Address: 2973 NW 68 STREET  
City-St-Zip: FORT LAUDERDALE, FL 33309

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 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: VIRGINIA DAY

T

04/17/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date