

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Dec 11, 2008
Secretary of State

DOCUMENT# N93000004596

Entity Name: DADE CITY POLICE ATHLETIC LEAGUE, INC.**Current Principal Place of Business:**6747 DAIRY ROAD
ZEPHYRHILLS, FL 33542 US**New Principal Place of Business:**37307 BEAUCHAMP AVE
DADE CITY, FL 33523 US**Current Mailing Address:**POB 311
DADE CITY, FL 33526 US**New Mailing Address:**PO BOX 311
DADE CITY, FL 33526 US**FEI Number:** 59-3181448**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**AUVIL, JON L
37837 MERIDIAN AVE
SUITE 314
DADE CITY, FL 33525 US**Name and Address of New Registered Agent:**MCDONALD, WILLIAM J
37307 BEAUCHAMP AVE
DADE CITY, FL 33523 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: WILLIAM J. MCDONALD

12/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FLOYD, VERNON
Address: 37812 SUMMER AVE
City-St-Zip: DADE CITY, FL 33525

Title: AD () Delete
Name: FADLING, EARL
Address: 21023 LLOYD AVENUE
City-St-Zip: LACOOCHIEE, FL 33523

Title: T () Delete
Name: BARNES, ALISHA
Address: 6747 DAIRY ROAD
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: CC () Delete
Name: SIMS, KELLY
Address: P.O. BOX 1404
City-St-Zip: DADE CITY, FL 33523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR. (X) Change () Addition
Name: MCDONALD, WILLIAM
Address: 37307 BEAUCHAMP
City-St-Zip: DADE CITY, FL 33523

Title: A.D. (X) Change () Addition
Name: FADLING, EARL
Address: 21023 LLOYD
City-St-Zip: LACOOCHIEE, FL 33523

Title: SEC. (X) Change () Addition
Name: FADLING, VIRGINIA
Address: 38167 MICHEAL ST
City-St-Zip: DADE CITY, FL 33523

Title: A.S. (X) Change () Addition
Name: SISCO, TERESA
Address: 21023 LLOYD AVE
City-St-Zip: LACOOCHIEE, FL 33523

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM MCDONALD

DIR

12/11/2008

Electronic Signature of Signing Officer or Director

Date