

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N93000004745 (6)**

1. Corporation Name

EAST MANATEE YOUTH FOOTBALL ASSOCIATION, INC.



Principal Place of Business

**10508-A STATE ROAD 64 E.
BRADENTON FL 34202
US**

Mailing Address

**P.O. BOX 21091
BRADENTON FL 34203-1091
US**

3. Date Incorporated or Qualified
10/20/1993

3a. Date of Last Report
04/27/1995

2. Principal Place of Business

2a. Mailing Address

21 **1154 CARMELLA CIRCLE**

26 **P.O. Box 21091**

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 **SARASOTA, FLORIDA**

28 **BRADENTON FLORIDA**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24 **34243**

US

29 **34203-1091**

US

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JACKSON, GARFIELD
1154 CARMELLA CIRCLE
SARASOTA FL 34243**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Garfield Jackson
(Signature, typed or printed name of registered agent and title if applicable.)

GARFIELD JACKSON - PRESIDENT

25 APR 96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **JACKSON, GARFIELD**
STREET ADDRESS **1154 CARMELLA CIRCLE**
CITY-ST-ZIP **SARASOTA FL 34243**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **VD** ☒ DELETE
NAME **BURISH, THOMAS**
STREET ADDRESS **10508-A, STATE ROAD 64-E**
CITY-ST-ZIP **BRADENTON FL 34202**

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **JOHN COLLINS**
2.3 STREET ADDRESS **ROBINSON ROAD**
2.4 CITY-ST-ZIP **MYAKKA CITY, FLORIDA 34251**

TITLE **SD** ☒ DELETE
NAME **PAULINE, KIM**
STREET ADDRESS **3009 50TH AVE. DR.E.**
CITY-ST-ZIP **BRADENTON FL 34203**

3.1 TITLE **SD** ☒ Change ☐ Addition
3.2 NAME **JEANNE GIORDANO**
3.3 STREET ADDRESS **5515 33RD ST. E.**
3.4 CITY-ST-ZIP **BRADENTON FLORIDA 34203**

TITLE **TD** ☒ DELETE
NAME **SCOTT, TRACY**
STREET ADDRESS **712 53RD AVE.DR. W.**
CITY-ST-ZIP **BRADENTON FL 34207**

4.1 TITLE **TD** ☒ Change ☐ Addition
4.2 NAME **GERALDINE DENT**
4.3 STREET ADDRESS **4811 11TH AVE. CIRCLE EAST**
4.4 CITY-ST-ZIP **BRADENTON FLORIDA 34208**

TITLE **D** ☐ DELETE
NAME **PRILLAMAN, PAUL E**
STREET ADDRESS **7175 GULF OF MEXICO DRIVE#24**
CITY-ST-ZIP **LONGBOAT KEY FL 34228**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Paul E Prillaman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

25 APR 96
Date

941 3835309
Daytime Phone #

CR2E037 (12/95)