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**Mar 04, 1999 8:00 am**  
**Secretary of State**

03-04-1999 90163 006 \*\*\*\*61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N93000004745**

1. Corporation Name

**EAST MANATEE YOUTH FOOTBALL ASSOCIATION, INC.**

Principal Place of Business

6208 FOX HOLLOW LANE  
BRADENTON FL 34202  
US

Mailing Address

PO BOX 21091  
BRADENTON FL 34203-1091  
US



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip Country

29

30

3. Date Incorporated or Qualified

10/20/1993

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

HALL, ROBERT  
6208 FOX HOLLOW LANE  
BRADENTON FL 34202

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P  
HALL, ROBERT  
STREET ADDRESS 6208 FOX HOLLOW LANE  
CITY-ST-ZIP BRADENTON FL 34202

TITLE ☐ DELETE

NAME VP  
MURPHY, DANNE  
STREET ADDRESS 4626 SUMMER OAK AVENUE EAST #928  
CITY-ST-ZIP SARASOTA FL 34243

TITLE ☒ DELETE

NAME SD  
EARLY, ELLEN "REE"  
STREET ADDRESS 5507 33RD ST EAST  
CITY-ST-ZIP BRADENTON FL

TITLE ☐ DELETE

NAME T  
MURPHY, SUSAN  
STREET ADDRESS 4626 SUMMER OAK AVENUE EAST #928  
CITY-ST-ZIP SARASOTA FL 34243

TITLE ☐ DELETE

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)