

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005139

FILED  
Aug 31, 2008  
Secretary of State

**Entity Name:** TOWN 'N COUNTRY PACKER YOUTH FOOTBALL, INC.

**Current Principal Place of Business:**

11308 PARTRIDGE DRIVE  
TAMPA, FL 33625

**New Principal Place of Business:**

6821 WAYSIDE CT  
TAMPA, FL 33634

**Current Mailing Address:**

P.O. BOX 262144  
TAMPA, FL 33685

**New Mailing Address:**

**FEI Number:** 65-0430014      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MARTIN, RHONDA L  
11308 PARTRIDGE DRIVE  
TAMPA, FL 33625      US

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

BECKETT, ALEXANDER  
6821 WAYSIDE CT  
TAMPA, FL 33634      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: ALEXANDER BECKETT

08/31/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: HUEBNER, JAMES  
Address: 4747 W WATERS AVENUE #2104  
City-St-Zip: TAMPA, FL 33614

Title: D      ( ) Delete  
Name: MARTIN, DOUGLAS  
Address: 11308 PARTRIDGE DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: S      ( ) Delete  
Name: SUAREZ, CHRISTINA  
Address: 6409 W PARIS  
City-St-Zip: TAMPA, FL 33634

Title: D      ( ) Delete  
Name: BECKETT, ALEXANDER  
Address: 6821 WAYSIDE COURT  
City-St-Zip: TAMPA, FL 33634

Title: D      ( ) Delete  
Name: MARTIN, RHONDA  
Address: 11308 PARTRIDGE DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: D      ( ) Delete  
Name: MUNRO, DAVID  
Address: 7009 DONALD AVE  
City-St-Zip: TAMPA, FL 33614

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

Title: P      (X) Change ( ) Addition  
Name: HUEBNER, JAMES  
Address: 10498 OAKHURST RD N  
City-St-Zip: LARGO, FL 33774

Title: D      (X) Change ( ) Addition  
Name: CLAUSE, CHRISTOPHER  
Address: 4747 W WATERS AVE  
City-St-Zip: TAMPA, FL 33614

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

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

Title: D      (X) Change ( ) Addition  
Name: MUNRO, SHARON  
Address: 7009 DONALD AVE  
City-St-Zip: TAMPA, FL 33614

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

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: JAMES M. HUEBNER

PRES

08/31/2008

Electronic Signature of Signing Officer or Director

Date