2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005139

FILED Apr 22, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

6821 WAYSIDE CT 6822 DOVER CT TAMPA, FL 33634 TAMPA, FL 33634

Current Mailing Address: New Mailing Address:

P.O. BOX 262144 TAMPA, FL 33685

FEI Number: 65-0430014 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BECKETT, ALEXANDER SIERRA-GARCIA, LISA 6821 WAYSIDE CT 6822 DOVER CT TAMPA, FL 33634 US 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: LISA SIERRA-GARCIA 04/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition
Name: HUEBNER, JAMES Name: SIERRA-GARCIA, LISA
Address: 10498 OAKHURST RD N Address: 6822 DOVER CT

 Address:
 10498 OAKHURST RD N
 Address:
 6822 DOVER CT

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:
 TAMPA, FL 33634

Title: D () Delete Title: D (X) Change () Addition Name: CLAUSE, CHRISTOPHER Name: MCCLOUD, RAY

 Address:
 4747 W WATERS AVE
 Address:
 15911 MUIRFIELD DRIVE

 City-St-Zip:
 TAMPA, FL 33614
 City-St-Zip:
 ODESSA, FL 33556

Title: S () Delete Title: C (X) Change () Addition Name: SUAREZ, CHRISTINA Name: SANDERS, SALLY

 Address:
 6409 W PARIS
 Address:
 310 ADALEE AVE

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:
 TAMPA, FL 33634

Title: D () Delete Title: T (X) Change () Addition

 Name:
 BECKETT, ALEXANDER
 Name:
 ORTEGA, GEMARIS

 Address:
 6821 WAYSIDE COURT
 Address:
 4415 LETO LAKES BLVD #302

Address: 6821 WAYSIDE COURT Address: 4415 LETO LAKES BLVD #302 City-St-Zip: TAMPA, FL 33634 City-St-Zip: TAMPA, FL 33614

Title: D () Delete Title: V (X) Change () Addition

Name: MUNRO, SHARON Name: MAHTANI, STACY
Address: 7009 DONALD AVE Address: 9123 WHISPERING WILLOW WAY

 City-St-Zip:
 TAMPA, FL 33614
 City-St-Zip:
 TAMPA, FL 33614

Title: D (X) Delete Title: () Change () Addition

 Name:
 MUNRO, DAVID
 Name:

 Address:
 7009 DONALD AVE
 Address:

 City-St-Zip:
 TAMPA, FL 33614
 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: LISA SIERRA-GARCIA P 04/22/2009