2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000409

FILED Mar 13, 2004 Secretary of State

Entity Name: SOUTHSIDE YOUTH ATHLETIC ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 6801 ALTAMA RD JACKSONVILLE, FL 32216 **Current Mailing Address: New Mailing Address:** P O BOX 17466 JACKSONVILLE, FL 32245 FEI Number: 59-3217819 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: GEISLER, DAWN 7809 CAYMAN ROAD JACKSONVILLE, FL 32216 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition GEISLER, DAWN FUSSELL, DAVID Name: Name: Address: 7809 CAYMAN ROAD Address: 5934 SAXONY WOODS City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32211 Title: TD () Delete Title: () Change () Addition Name: GEISLER, DAWN Name: Address: 7809 CAYMAN ROAD Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition CHIOTTI, TERESA Name: MILLER, CAROLINE Name: 578 BAY RIDGE ROAD Address: Address: 7809 CAYMAN ROAD City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216 Title: () Delete Title: () Change (X) Addition Name: Name: **GUNTER, TROY** Address: Address: 816 TRINIDAD ROAD City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32216

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAWN GEISLER TD 03/13/2004