## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 17, 2006 8:00 am Secretary of State DOCUMENT # N94000005438 1. Entity Name 02-17-2006 90081 010 \*\*\*\*70 00 FORT WALTON BEACH YOUTH SPORTS ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 967 P.O. BOX 967 FORT WALTON BEACH FL 32549-0967 FORT WALTON BEACH FL 32549-0967 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-3295572 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LEWIS, DAVID L Street Address (P.O. Box Number is Not Acceptable) 212 OAK STREET S.E. FT WALTON BEACH FL 32548 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if implicable FILE NOW: FEE IS \$61:25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to ું ું Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. **PVST** TITLE ☐ Delete TITLE ☐ Change LEWIS, DAVID L NAME NAME 212 OAK STREET S.E. STREET ADDRESS STREET ADDRESS FT. WALTON BEACH FL 32548 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE LEWIS, DAVID:L 212 OAK STREET S.E. STREET ADDRESS STREET ADDRESS FT. WALTON BEACH FL 32548 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition LEWIS, RAYMOND D. NAME NAME OKALOSA 100 ELM AVE STREET ADDRESS STREET ADDRESS 32548 FORT WALTON BEACH FL 32548 CITY-ST-7IP CITY-ST-789 TITLE ☐ Delete TITLE Change Addition LEWIS, MARTIN L NAME NAME 100 ELM AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT WALTON BEACH FL 32548 CITY-ST-ZIP ☐ Delete D TITLE ☐ Change ☐ Addition TITLE LEWIS, TIMOTHY D NAME NAME 100 ELM AVE STREET ADDRESS STREET ADDRESS FORT WALTON BEACH FL 32548 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE JOHNSON, RONALD E JR NAME NAME 100 ELM AVE. S.E. STREET ADDRESS STREET ADDRESS FT. WALTON BEACH FL 32458 CITY-ST-7IP CfTY-ST-7/P

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.