2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9500000347

FILED Apr 09, 2009 Secretary of State

Entity Name: SUNCOAST YOUTH FOOTBALL CONFERENCE, INC.

Current Principal Place of Business: New Principal Place of Business: 1921 BLUE HERON WAY PALM HARBOR, FL 34683 US **Current Mailing Address: New Mailing Address:** PO BOX 470 DUNEDIN, FL 34697 US FEI Number: 90-0416865 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANDERSON, LEONARD W JR 1921 BLUE HERON WAY PALM HARBOR, FL 34683 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: (X) Change () Addition () Delete ANDERSON, LEONARD W JR ANDERSON, LEONARD W JR Name: Name: 1921 BLUE HERON WAY Address: 1921 BLUE HERON WAY Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34683 Title: DS Title: SEC (X) Change () Addition () Delete AVISE, JACQUE Name: AVISE, JACQUE Name: Address: 895 SEMINOLE BLVD Address: 895 SEMINOLE BLVD City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689 Title: () Delete Title: () Change () Addition MATHEWS, JOHNIE W REV. Name: Name: 2541 54TH AVE. S. Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33712 City-St-Zip: Title: VΡ () Delete Title: (X) Change () Addition Name: HAMLET, DONAVAN Name: HAMLET, DONAVAN 2074 ORANGESIDE ROAD Address: 1653 OAK SPRINGS DR. Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: PALM HARBOR, FL 34683 Title: () Delete Title: () Change (X) Addition EGG, MICHELE Name: Name: 1781 WILMAR AVENUE Address: Address: City-St-Zip: City-St-Zip: TARPON SPRINGS, FL 34689

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: MICHELE EGG TRES 04/09/2009