

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000437

FILED  
Mar 22, 2005  
Secretary of State

Entity Name: WEST COAST YOUTH FOOTBALL CONFERENCE, INC.

**Current Principal Place of Business:**

11500 SUMMIT WEST BLVD., #7-C  
TEMPLE TERRACE, FL 33617 US

**New Principal Place of Business:**

**Current Mailing Address:**

11500 SUMMIT WEST BLVD., #7-C  
TEMPLE TERRACE, FL 33617 US

**New Mailing Address:**

FEI Number: 59-3354624

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHAMBERS, STEVE  
1304 PEACHFIELD DR  
VALRICO, FL 33594 US

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

WING, KENNETH G ESQ  
11500 SUMMIT WEST BLVD., #7-C  
TEMPLE TERRACE, FL 33617 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: KENNETH G. WING

03/22/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WING, KENNETH G ESQ  
Address: 11500 SUMMIT WEST BLVD., #7-C  
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: D ( ) Delete  
Name: FOWLER, GARY  
Address: 5790 HIGH RIDGE LOOP  
City-St-Zip: LAKELAND, FL 33813

Title: D ( ) Delete  
Name: MORRIS, MARTY  
Address: 4611 RIVER CLOSE BLVD  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: CHAMBERS, STEVE  
Address: 4890 W. KENNEDY BLVD., #440  
City-St-Zip: TAMPA, FL 33609

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

Title: PD (X) Change ( ) Addition  
Name: FOWLER, GARY  
Address: 5790 HIGH RIDGE LOOP  
City-St-Zip: LAKELAND, FL 33813 US

Title: VD (X) Change ( ) Addition  
Name: MORRIS, MARTY  
Address: 2216 HIGH POINT DR  
City-St-Zip: BRANDON, FL 33511

Title: SD (X) Change ( ) Addition  
Name: MCCARN, MIKE  
Address: 29507 BIRDSEYE DR  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: TD (X) Change ( ) Addition  
Name: GUDE, STEVE  
Address: 6914 DORMANY LOOP RD  
City-St-Zip: PLANT CITY, FL 33566

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: GARY FOWLER

PD

03/22/2005

Electronic Signature of Signing Officer or Director

Date