

FILE NOW: FILING FEE IS \$61.25

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Jun 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N95000001330 (8)			
1. Corporation Name LELY POP WARNER FOOTBALL, INC.			



Principal Place of Business 825 FIFTH AVE S NAPLES FL 33940 US	Mailing Address PO BOX 2524 NAPLES FL 34106-2524 US
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2. Principal Place of Business 21 825 FIFTH AVE. So.	2a. Mailing Address 26 P.O. BOX 9167
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State NAPLES, FLORIDA	28 City & State NAPLES, FLORIDA
24 Zip 34101-9167	25 Country USA
29 Zip 34101-9167	30 Country USA

3. Date Incorporated or Qualified 03/20/1995	3a. Date of Last Report 04/08/1996
4. FEI Number 65-0557113	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent BOWES, DOUGLAS 586 YUCCA DRIVE NAPLES FL 33940	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code 34101

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.	
SIGNATURE DOUGLAS BOWES	DATE 5-1-97

12. OFFICERS AND DIRECTORS	
TITLE	☐ DELETE
NAME	P MILLER, JACKIE
STREET ADDRESS	608 SQUIRE CT
CITY-ST-ZIP	NAPLES FL 33942
TITLE	☒ DELETE
NAME	V SIZEMORE, ROBIN
STREET ADDRESS	2885 PINE RUN RD
CITY-ST-ZIP	NAPLES FL 33942
TITLE	☒ DELETE
NAME	D O'DRISCOLL, JODIE
STREET ADDRESS	3653 KENT DR
CITY-ST-ZIP	NAPLES FL 33942
TITLE	☒ DELETE
NAME	T COOPER, TERRY
STREET ADDRESS	5409 SHOLTZ ST
CITY-ST-ZIP	NAPLES FL 33962
TITLE	☒ DELETE
NAME	S D'AMICO, LUCY
STREET ADDRESS	PO BOX 2524
CITY-ST-ZIP	NAPLES FL 33939-2524
TITLE	☐ DELETE
NAME	D BOWES, DOUGLAS
STREET ADDRESS	586 YUCCA DR
CITY-ST-ZIP	NAPLES FL 33940

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	PRESIDENT
1.3 STREET ADDRESS	MILLER, JACKIE
1.4 CITY-ST-ZIP	363 PINEHURST CR. D
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	VICE-PRESIDENT
2.3 STREET ADDRESS	CATHY SHAW,
2.4 CITY-ST-ZIP	4107 MINDI AVE. D
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	WAYS & MEANS
3.3 STREET ADDRESS	MERCEDES. PADIN,
3.4 CITY-ST-ZIP	2465 JAMES RD. T
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	TREASURER
4.3 STREET ADDRESS	SALLY VANWINKLE,
4.4 CITY-ST-ZIP	471 GRAY CT. T
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	SECRETARY
5.3 STREET ADDRESS	LINDA BOWERMAN,
5.4 CITY-ST-ZIP	4170 3RD AVE. S.W. T
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	ATHLETIC DIRECTOR
6.3 STREET ADDRESS	DOUGLAS BOWES
6.4 CITY-ST-ZIP	(SAME) 586 YUCCA DR. D

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, unchanged, or on an attachment with an address.

CR2E037 (9/96)