

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001330

FILED
Apr 30, 2004
Secretary of State**Entity Name:** NAPLES SEMINOLES POP WARNER FOOTBALL INC**Current Principal Place of Business:**4888 DAVIS BLVD., PMB 176
NAPLES, FL 34104 US**New Principal Place of Business:****Current Mailing Address:**4888 DAVIS BLVD., PMB 176
NAPLES, FL 34104 US**New Mailing Address:****FEI Number:** 65-0557113**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CARTER, JULIE K
1495 23RD STREET SW
NAPLES, FL 34117 US**Name and Address of New Registered Agent:**POOLE, JACK
4888 PMB 176
NAPLES, FL 34104 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: JACK POOLE

04/30/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARTER, JULIE K
Address: 1495 23RD STREET SW
City-St-Zip: NAPLES, FL 34117

Title: VP () Delete
Name: SNYDER, CYNTHIA D
Address: 1354 TRINIDAD AVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: T () Delete
Name: SINCERBOX, TAMBRA
Address: 2095 DELLA DR
City-St-Zip: NAPLES, FL 34117

Title: S () Delete
Name: PEREZ, ROSEMARY
Address: 888 COCONUT CIR E
City-St-Zip: NAPLES, FL 34104

Title: AD (X) Delete
Name: SMITH, JOE
Address: 5248 MYRTLE LANE
City-St-Zip: NAPLES, FL 34113

Title: CD (X) Delete
Name: SMITH, TRACI
Address: 5248 MYRTLE LANE
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POOLE, JACK
Address: 4888 DAVID BLVD PMB 176
City-St-Zip: NAPLES, FL 34104

Title: TRES (X) Change () Addition
Name: BENTON, MICHELLE R
Address: 4888 DAVIS BLVD PMB 176
City-St-Zip: NAPLES, FL 34104

Title: CD (X) Change () Addition
Name: FOX, KELLY
Address: 4888 DAVIS BLVD PMB 176
City-St-Zip: NAPLES, FL 34104

Title: AD (X) Change () Addition
Name: SMITH, JOEY
Address: 4888 DAVIS BLVD PMB 176
City-St-Zip: NAPLES, FL 34104

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHELLE BENTON

TRES

04/30/2004

Electronic Signature of Signing Officer or Director

Date