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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003123 (5)

1. Corporation Name

MELBOUNE YOUTH FOOTBALL ASSOCIATION, INC.



Principal Place of Business

Mailing Address

3200 BRENTWOOD LANE
MELBOURNE FL 32934

P.O. BOX 410102
MELBOURNE FL 32941-0102

3. Date Incorporated or Qualified
06/28/1995

3a. Date of Last Report
04/15/1996

2. Principal Place of Business

21 1574 Dandelion Dr.

2a. Mailing Address

26 P.O. Box 360656

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Melbourne FL

City & State

28 Melbourne FL

Zip

24 32935

Country

25 U.S.

Zip

29 32936-0656

Country

30 U.S.

4. FEI Number

08330243

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

LAWLER, CHUCK
3200 BRENTWOOD LANE
MELBOURNE FL 32934

10. Name and Address of New Registered Agent

81 Name

Jim Krause

82 Street Address (P.O. Box Number is Not Acceptable)

1574 Dandelion Dr

83

84 City

Melbourne

FL

85 Zip Code

32935

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 *Jim Krause*

Signature typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/5/97

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME LAWLER, CHUCK
STREET ADDRESS 3200 BRENTWOOD LANE
CITY-ST-ZIP MELBOURNE FL 32934

TITLE VPD ☐ DELETE

NAME GRAHAM, ANTHONY
STREET ADDRESS PO BOX 60708 N/A
CITY-ST-ZIP PALM BAY FL 32906-0708

TITLE SD ☒ DELETE

NAME PUTERBAUGH, THRESA
STREET ADDRESS 2040 JANA CT.
CITY-ST-ZIP VIERA FL 32940

TITLE VPD ☒ DELETE

NAME MILBRY, ROZELL
STREET ADDRESS 210 LANTANA LN.
CITY-ST-ZIP MELBOURNE FL 32901

TITLE T ☒ DELETE

NAME PISCOTTO, DEBBIE
STREET ADDRESS 3471 SADDLE BROOK
CITY-ST-ZIP MELBOURNE FL 32934

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President (T) ☐ Change ☒ Addition

1.2 NAME Jim Krause
1.3 STREET ADDRESS 1574 Dandelion Dr
1.4 CITY-ST-ZIP melb FL 32935

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE Secretary (T) ☐ Change ☒ Addition

3.2 NAME michelle Ballinger
3.3 STREET ADDRESS 546 Ironwood Dr
3.4 CITY-ST-ZIP Melbourne FL 32935

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Treasurer (T) ☐ Change ☒ Addition

5.2 NAME Belinda Goff
5.3 STREET ADDRESS 1062 Holland St
5.4 CITY-ST-ZIP Melbourne FL 32935

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 if changed, or on an attachment with an address.

SIGNATURE: *Belinda P. Goff* Belinda P. Goff Treasurer 2/5/97

CR2E037 (9/96)