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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000003123

1. Corporation Name

MELBOURNE YOUTH FOOTBALL AND CHEERLEADING ASSOCIATION, INC.

Principal Place of Business

1574 DANDELION DR.
MELBOURNE FL 32935
US

Mailing Address

P.O. BOX 360656
MELBOURNE FL 32936-0656
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

06/28/1995

4. FEI Number

NOT-APPLICABLE

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

9. Name and Address of Current Registered Agent

KRAUSE, JIM
1574 DANDELION DR.
MELBOURNE FL 32935

10. Name and Address of New Registered Agent

81 Name **Michelle Bollinger**

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

Michelle Bollinger - Treasurer

1-22-99

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PT** ☒ DELETE
NAME **KRAUSE, JIM**
STREET ADDRESS **1574 DANDELION DR**
CITY-ST-ZIP **MELBOURNE FL 32935**

TITLE **VPD** ☐ DELETE
NAME **BELL, RONALD**
STREET ADDRESS **1040 BIG HORN CIRCLE**
CITY-ST-ZIP **PALM BAY FL 32907**

TITLE **ST** ☒ DELETE
NAME **KRAUSE, SANDRA**
STREET ADDRESS **1574 DANDELION DR**
CITY-ST-ZIP **MELBOURNE FL 32935**

TITLE **TTR** ☐ DELETE
NAME **BOLLINGER, MICHELLE**
STREET ADDRESS **546 IRONWOOD DR**
CITY-ST-ZIP **MELBOURNE FL 32935**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PT** ☐ Change ☐ Addition
1.2 NAME **LAWLER, CHARLES**
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE **P/D** ☐ Change ☒ Addition
2.2 NAME **LAWLER, CHARLES**
2.3 STREET ADDRESS **3200 Brentwood Lane**
2.4 CITY-ST-ZIP **MELBOURNE, FL 32934**

3.1 TITLE **S/D** ☐ Change ☒ Addition
3.2 NAME **Michelle Webb**
3.3 STREET ADDRESS **1804 Clover Circle**
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 ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Michelle Bollinger** **Michelle Bollinger** **1-22-99** (407)2595103

CR2E037 (11/98)