

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004926

FILED  
Jul 09, 2006  
Secretary of State

Entity Name: SUMTER DIXIE YOUTH LEAGUE INC.

## Current Principal Place of Business:

WEBSTER MEMORIAL PARK  
WEBSTER, FL 33597

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 646  
WEBSTER, FL 33597

## New Mailing Address:

FEI Number: 59-3426106      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

PEACOCK, HORACE  
12949 STATE ROAD 471  
WEBSTER, FL 33597      US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SWAFFORD, LARRY  
Address: 9719 CR 733  
City-St-Zip: WEBSTER, FL 33597

Title: VP ( ) Delete  
Name: RAY, CHIP  
Address: 12317 COUNTY ROAD 727  
City-St-Zip: WEBSTER, FL 33597

Title: S ( ) Delete  
Name: SIZEMORE, JEANIE  
Address: P.O. BOX 156  
City-St-Zip: CENTER HILL, FL 33514

Title: C ( ) Delete  
Name: DOBSON, BRUCE  
Address: 14695 CR 757  
City-St-Zip: WEBSTER, FL 33597

Title: T ( ) Delete  
Name: PEACOCK, HORACE  
Address: 12949 STATE ROAD 471  
City-St-Zip: WEBSTER, FL 33597

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition  
Name: PEACOCK, JENNIFER M  
Address: 12949 S.R. 471  
City-St-Zip: WEBSTER, FL 33597

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

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 Chapter 119, 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: HORACE PEACOCK

R/A

07/09/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date