

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004926

FILED
Feb 26, 2007
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 (X)

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: PEACOCK, JENNIFER M
Address: 12949 S.R. 471
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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: WILLIAMS, CAROLYN
Address: 12175 C.R. 721
City-St-Zip: WEBSTER, FL 33597

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

TREA

02/26/2007

Electronic Signature of Signing Officer or Director

Date