## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000005377

FILED Apr 29, 2008 Secretary of State

Entity Name: PALM BAY POLICE ATHLETIC LEAGUE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 190 MALABAR ROAD SUITE 103 PALM BAY, FL 32907 **New Mailing Address: Current Mailing Address:** 130 MALABAR ROAD SE PALM BAY, FL 32907 FEI Number: 59-3188241 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BRIMER, LESLEE 130 MALABAR RD SE US PALM BAY, FL 32907 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition BRIMER, LESLEE Name: BRIMER, LESLEE Name: 130 MALABAR ROAD, SE Address: 850 LOGGERHEAD ISLAND DRIVE Address: City-St-Zip: PALM BAY, FL 32907 City-St-Zip: SATELLITE BEACH, FL 32937 Title: ( ) Delete Title: () Change () Addition STEUCK, DENNIS Name: Name: Address: 495 HURLEY BLVD., SW Address: City-St-Zip: PALM BAY, FL 32908 City-St-Zip: Title: () Delete Title: () Change () Addition MULDOON, DOUGLAS Name: Name: 130 MALABAR ROAD, SE Address: Address: City-St-Zip: PALM BAY, FL 32907 City-St-Zip: Title: **TRES** () Delete Title: () Change () Addition Name: VIRGIN, SANDY Name: 1199 LAMPLIGHTER DRIVE, NW Address: Address: City-St-Zip: PALM BAY, FL 32907 City-St-Zip: Title: **PRES** ( ) Delete Title: PRES (X) Change ( ) Addition YOUNGBLOOD, JENNIFER Name: Name: BROCK, ROSS 251 MARION STREET 101 TWILIGHT AVENUE Address: Address: City-St-Zip: INDIAN HARBOR BEACH, FL 32937 City-St-Zip: PALM BAY, FL 32907 Title: () Delete Title: ( ) Change (X) Addition ROWLAND, LESLIE Name: Name: Address: Address: 986 SARETA STREET, SE PALM BAY, FL 32909 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SANDY VIRGIIN TRES 04/29/2008