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Sep 19 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N96000001288 (7)

1. Corporation Name

SUNBELT YOUTH FOOTBALL, INC.

Principal Place of Business

114 4TH STREET
JAN PHYL VILLAGE
WINTER HAVEN FL 33880

Mailing Address

POST OFFICE BOX 975
WINTER HAVEN FL 33882-0975



3. Date Incorporated or Qualified 03/04/1996
3a. Date of Last Report

2. Principal Place of Business

21 13252 NE 26th Ave.

Suite, Apt. #, etc.

Country Hills Estate

City & State

23 Okeechobee, Fla.

Zip

24 34972

Country

25 Okeechobee

2a. Mailing Address

26 P.O. Box 272

Suite, Apt. #, etc.

City & State

28 Okeechobee, Fla.

Zip

29 34973-0272

Country

Okeechobee

4. FEI Number

65-0774318

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

LASHLEY, WILLIAM V
114 4TH STREET / JAN PHYL VILLAGE
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

81 Name

Norma S. Kemp

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

13252 NE 26th Avenue

83 Country Hills Estate

84 City

Okeechobee

FL

85 Zip Code
34973

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

Norma S. Kemp - Secretary

Aug. 18, 97

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE President ☒ DELETE

NAME Chuck Case
STREET ADDRESS 106 7th St. SPV
CITY-ST-ZIP Winter Haven, Fla. 33880

TITLE V-President ☒ DELETE

NAME Larry Jones
STREET ADDRESS 1721 Cardova Cr. W.
CITY-ST-ZIP Lakeland, Fla. 33801

TITLE Secretary ☒ DELETE

NAME William V. Lashley
STREET ADDRESS 114 4th Street
CITY-ST-ZIP Winter Haven, Fla. 33880

TITLE Treasurer ☒ DELETE

NAME William V. Lashley
STREET ADDRESS 114 4th Street
CITY-ST-ZIP Winter Haven, Fla. 33880

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 President P/D ☒ Change ☐ Addition

1.2 NAME Dan Milton
1.3 STREET ADDRESS 8103 Wakeford Rd.
1.4 CITY-ST-ZIP Lake Wales, Fla. 33853

2.1 TITLE Vice-President V/D ☒ Change ☐ Addition

2.2 NAME Larry Shadd
2.3 STREET ADDRESS 125 Wilder Rd.
2.4 CITY-ST-ZIP Lakeland, Fla. 33809

3.1 TITLE Secretary S/D ☒ Change ☐ Addition

3.2 NAME Norma S. Kemp
3.3 STREET ADDRESS 13252 NE 26th Ave.
3.4 CITY-ST-ZIP Okeechobee, Fla. 34972

4.1 TITLE Treasurer T/D ☒ Change ☐ Addition

4.2 NAME Jimmy L. Kemp
4.3 STREET ADDRESS 13252 NE 26th Ave.
4.4 CITY-ST-ZIP Okeechobee, Fla. 34972

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 do 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.

CR2E037 (9/96)