2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002507

FILED Mar 27, 2006 Secretary of State

Entity Name: PALM CITY YOUTH FOOTBALL, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
PO BOX 1 PALM CIT	792 Y, FL 34990				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 1 PALM CIT	792 Y, FL 34991				
FEI Number	: 65-0664299	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address of	of New Registered Agent:	
STUART,	PÍTTS TERRA FL 34997 (CE JS			
		submits this statement for the	purpose of changing its registere	d office or registered agent, or both	
in the State	e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both	
n the State	e of Florida. RE:			d office or registered agent, or both Date	
in the State	e of Florida. RE:	nic Signature of Registered Ag	ent		
in the State SIGNATUI OFFICER Title: Name: Address:	e of Florida. RE: Electron S AND DIREC	nic Signature of Registered Ag TORS:) Delete ISE THOUSE DR	ent	Date	
in the State SIGNATUI OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electron S AND DIREC TD (KEYSER, LOU 842 SW LIGHT PALM CITY, FI	nic Signature of Registered Ag TORS:) Delete ISE IHOUSE DR - 34990) Delete ENNETH S TERRACE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO	
in the State	e of Florida. RE: Electron S AND DIREC TD (KEYSER, LOU 842 SW LIGHT PALM CITY, FL PD (REARDON, KE 2013 SW PITT STUART, FL 3	nic Signature of Registered Age TORS:) Delete ISE THOUSE DR _ 34990) Delete ENNETH S TERRACE 14997) Delete ICK S TERRACE	ent ADDITIONS/CHANG Title: Name: Address: City-St-Zip: Title: Name: Address:	Date ES TO OFFICERS AND DIRECTO () Change () Addition	

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: LOUISE KEYSER TD 03/27/2006