2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N96000002718

Entity Name: ENGLEWOOD YOUTH SOCCER ASSOCIATION, INC.

Current Principal Place of Business:

45 OAKLAND HILLS COURT
ROTONDA WEST, FL 33947 US

New Principal Place of Business:

1004 BOUNDARY BLVD
ROTONDA WEST, FL 33947 US

Current Mailing Address:

PO BOX 1634
ENGLEWOOD, FL 342951634 US

New Mailing Address:

FEI Number: 65-0701734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

IOMMELLI, ANN M
45 OAKLAND HILLS COURT
ROTONDA WEST, FL 33947 US

Name and Address of New Registered Agent:

HODGES, SUSAN J
1004 BOUNDARY BLVD
ROTONDA WEST, FL 33947 US

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: SUSAN J HODGES 04/23/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SOUTH, MARK
Address: PO BOX 1634
City-St-Zip: ENGLEWOOD, FL 34295

Title: TD ( ) Delete
Name: IOMMELLI, ANN M
Address: 45 OAKLAND HILLS COURT
City-St-Zip: ROTONDA WEST, FL 33947

Title: VPD ( ) Delete
Name: SKALING, DAN
Address: PO BOX 1634
City-St-Zip: ENGLEWOOD, FL 34295

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: RG (X) Change ( ) Addition
Name: BERRY, JOANNE
Address: 60 FAIRWAY ROAD
City-St-Zip: ROTONDA WEST, FL 33947

Title: SEC (X) Change ( ) Addition
Name: DEPERSIA, STACEY J
Address: MARINER LANE
City-St-Zip: ROTONDA WEST, FL 33947

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: JOANNE BERRY RG 04/23/2009
Electronic Signature of Signing Officer or Director Date