

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002735

FILED  
Feb 18, 2009  
Secretary of State

**Entity Name:** WEST VOLUSIA YOUTH FOOTBALL & CHEERLEADING ASSOCIATION, INC.

**Current Principal Place of Business:**

103 PINE SIDE DR  
DEBARY, FL 32713

**New Principal Place of Business:**

3360 VANCOUVER AVE  
DELTONA, FL 32738

**Current Mailing Address:**

PO BOX 6486  
DELTONA, FL 32728 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

REGISTER, TIM  
103 PINE SIDE DR  
DEBARY, FL 32713 US

**Name and Address of New Registered Agent:**

SWANSON, JANEEN M  
3360 VANCOUVER AVE  
DELTONA, FL 32738 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: JANEEN M SWANSON

02/18/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: REGISTER, TIM  
Address: 103 PINE SIDE DR  
City-St-Zip: DEBARY, FL 32713

Title: T ( ) Delete  
Name: CURTIS, JOE  
Address: 245 ENGLEWOOD DR  
City-St-Zip: DEBARY, FL 32713

Title: S ( ) Delete  
Name: PEEPLES, LORI  
Address: 120 TANGLEWOOD RD  
City-St-Zip: DEBARY, FL 32713

Title: C ( ) Delete  
Name: SANDERFIELD, SCOTT  
Address: 1239 GIOVANNI ST  
City-St-Zip: DELTONA, FL 32725

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: HENLEY, MIKE  
Address: 323 SABAL SPRINGS COURT  
City-St-Zip: DEBARY, FL 32713

Title: VP (X) Change ( ) Addition  
Name: STEBBINS, DON  
Address: 864 SYLVIA DRIVE  
City-St-Zip: DELTONA, FL 32725

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

Title: T (X) Change ( ) Addition  
Name: SWANSON, JANEEN M  
Address: 3360 VANCOUVER AVE  
City-St-Zip: DELTONA, FL 32738

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: JANEEN M SWANSON

T

02/18/2009

Electronic Signature of Signing Officer or Director

Date