2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003605

FILED Apr 25, 2007 Secretary of State

Entity Name: NORTH PORT POP WARNER FOOTBALL ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business:

POST OFFICE BOX 7567 #1 GEORGE MULLEN CENTER NORTH PORT, FL 342870567 NORTH PORT, FL 34286

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 7567 PO BOX 7567

NORTH PORT, FL 342870567 NORTH PORT, FL 34288

FEI Number: 59-3361952 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:

ALLEN, TED
3229 TISHMAN AVE
ALLEN, TED
1395 GLENAN RD

NORTH PORT, FL 34286 US NORTH PORT, FL 34288 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: 04/25/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: () Change () Addition

 Name:
 BEATTY, MARK
 Name:

 Address:
 1111
 Address:

 City-St-Zip:
 NORTH PORT, FL 34287
 City-St-Zip:

Title: TRES () Delete Title: TRES (X) Change () Addition

 Name:
 ALLEN, TED
 Name:
 ALLEN, TED

 Address:
 3229 TISHMAN AVE
 Address:
 1395 GLENAN RD

 City-St-Zip:
 NORTH PORT, FL 34287
 City-St-Zip:
 NORTH PORT, FL 34288

Title: VICE () Delete Title: VICE (X) Change () Addition

Name: WOLCHUCK, CHARLIE Name: THOENNISSEN, LARRY Address: 1111 Address: 1111

City-St-Zip: NORTH PORT, FL 34286 City-St-Zip: NORTH PORT, FL 34286

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 RUSSO, BARB
 Name:
 KLEIN, DOROTHY

 Address:
 1111
 Address:
 1111

City-St-Zip: NORTH PORT, FL 34286 City-St-Zip: NORTH PORT, FL 34286

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: TED ALLEN, II TRE 04/25/2007