2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N96000006489

Entity Name: TRI-COUNTY YOUTH BASKETBALL LEAGUE, INC.

Current Principal Place of Business:

4220 NW 173RD DRIVE
MIAMI, FL 33055

New Principal Place of Business:

Current Mailing Address:

4220 NW 173RD DRIVE
MIAMI, FL 33055

New Mailing Address:

FEI Number: 65-0714656 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLEBROOK, ARTHUR
4220 NW 173RD DRIVE
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	DP	( ) Delete
Name:	COLEBROOK, ARTHUR	
Address:	4220 NW 173RD DRIVE	
City-St-Zip:	MIAMI, FL 33055	
Title:	DVP	( ) Delete
Name:	WILLIAMS, LYNN	
Address:	2940 N.W. 181 STREET	
City-St-Zip:	MIAMI, FL 33055	
Title:	DS	( ) Delete
Name:	COLEBROOK, DYATHA	
Address:	4220 NW 173 DR	
City-St-Zip:	MIAMI, FL 33055	
Title:	DVP	( ) Delete
Name:	COLEBROOK, CANDICE	
Address:	4220 NW 173 DR	
City-St-Zip:	MIAMI, FL 33055	
Title:	DVP	( ) Delete
Name:	COLEBROOK, BRANDON	
Address:	4220 NW 173 DR	
City-St-Zip:	OPA LOCKA, FL 33055	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ARTHUR COLEBROOK DP 04/30/2009

Electronic Signature of Signing Officer or Director — Date