2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000414

FILED Jul 05, 2007 Secretary of State

Entity Name: POLICE ATHLETIC LEAGUE OF DAVIE, INC.

Current Principal Place of Business: New Principal Place of Business: 4300 SW57 TERR DAVIE, FL 33314 **Current Mailing Address: New Mailing Address:** 4300 SW57 TERR DAVIE, FL 33314 FEI Number: 65-0716849 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCOTT, STEPHANIE 4300 SW 57 TERRACE **DAVIE, FL 33314** 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SCOTT, STEPHANIE Name: Name: 4300 SW 57 TERRACE Address: Address: City-St-Zip: **DAVIE. FL 33314** City-St-Zip: Title: Title: () Delete () Change () Addition EVANS, DONNA Name: Name: Address: 4300 SW 57 TERRACE Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip: Title: () Delete Title: (X) Change () Addition EVANS, TODD Name: EVANS, TODD Name: 4300 SW 57 TERRACE Address: Address: 4300 SW 57 TERRACE City-St-Zip: **DAVIE. FL 33314** City-St-Zip: **DAVIE. FL 33314** Title: VΡ () Delete Title: (X) Change () Addition Name: MONTGOMERY, MATHEW Name: MONTGOMERY, JUSTIN 1300 SW 57 TERR Address: Address: 4300 SW 57 TERR City-St-Zip: **DAVIE, FL 33314** City-St-Zip: DAVIE, FL 33314 Title: () Delete Title: () Change () Addition RODRIGUEZ, CARLOS Name: Name: 4300 SW 57 TERR Address: Address: City-St-Zip: **DAVIE, FL 33314** City-St-Zip: Title: () Delete Title: (X) Change () Addition HUBERT, LISA PIGNATO, DAN Name: Name: Address: 4300 SW 57 TERR Address: 4300 SW 57 TERR **DAVIE, FL 33314 DAVIE, FL 33314** City-St-Zip: 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: DONNA EVANS S 07/05/2007