

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000414

FILED
May 17, 2012
Secretary of State

Entity Name: POLICE ATHLETIC LEAGUE OF DAVIE, INC.

Current Principal Place of Business:

4300 SW 57 TERR
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

4300 SW 57 TERR
DAVIE, FL 33314

New Mailing Address:

FEI Number: 65-0716849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOTT, STEPHANIE
4300 SW 57 TERRACE
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

LYNN, PATRICK
4300 SW 57 TERRACE
DAVIE, FL 33314 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: PATRICK LYNN

05/17/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: TODD, EVANS
Address: 4300 SW 57 TERRACE
City-St-Zip: DAVIE, FL 33314

Title: S
Name: EVANS, DONNA
Address: 4300 SW 57 TERRACE
City-St-Zip: DAVIE, FL 33314

Title: VP
Name: CUNEO, EDWARD
Address: 4300 SW 57 TERRACE
City-St-Zip: DAVIE, FL 33314

Title: D
Name: ALBURY, TIM
Address: 4300 SW 57 TERRACE
City-St-Zip: DAVIE, FL 33314

Title: T
Name: HAM, AMY
Address: 1230 S. NOB HILL RD
City-St-Zip: DAVIE, FL 33325

Title: ED
Name: LYNN, PATRICK
Address: 1230 S. NOB HILL RD
City-St-Zip: DAVIE, FL 33323

I hereby 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 all other like empowered.

SIGNATURE: TIM ALBURY

D

05/17/2012

Electronic Signature of Signing Officer or Director

Date