

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000937

FILED
Apr 30, 2009
Secretary of State

Entity Name: AMERICAN YOUTH MOTOR SPORTS TEAM, INC.

Current Principal Place of Business:

5589 OKEECHOBEE BLVD
SUITE 104
WEST PALM BEACH, FL 33417

New Principal Place of Business:

Current Mailing Address:

5589 OKEECHOBEE BLVD
SUITE 104
WEST PALM BEACH, FL 33417

New Mailing Address:

FEI Number: 65-0736879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHERLOCK, VIRGINIA P PA
618 EAST OCEAN BLVD
STUART, FL 34995 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: D () Delete
Name: BILANCIO, CARRIE
Address: 705 TUSCALOOSA
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D () Delete
Name: CLINNIN, LAURIE
Address: 625 ALEMSON LANE NE
City-St-Zip: LAWRENCEVILLE, GA 30043

Title: ST () Delete
Name: YORK, JOHN
Address: 5589 OKEECHOBEE BLVD SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33417

Title: P () Delete
Name: BILANCIO, JOSEPH
Address: 1975 HABER SHAM MARINA RD
City-St-Zip: CUMMING, GA 30041

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: YORK, JOHN
Address: 5589 OKEECHOBEE BLVD SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33417

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: JOHN A YORK

CPA

04/30/2009

Electronic Signature of Signing Officer or Director

Date