

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002361

FILED  
Mar 05, 2008  
Secretary of State

**Entity Name:** POLICE ATHLETIC LEAGUE OF CHARLOTTE COUNTY, INC.

**Current Principal Place of Business:**

7474 UTILITIES RD  
PUNTA GORDA, FL 33982 US

**New Principal Place of Business:**

**Current Mailing Address:**

6868 SAN CASA DR  
ENGLEWOOD, FL 34224 US

**New Mailing Address:**

**FEI Number:** 59-3443937

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVENPORT, JOHN  
7474 UTILITIES RD  
PUNTA GORDA, FL 33982 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: ED ( ) Delete  
Name: DAVENPORT, JOHN  
Address: 7474 UTILITIES RD  
City-St-Zip: PUNTA GORDA, FL 33982 US

Title: DP ( ) Delete  
Name: CARTER, STEPHEN  
Address: 6868 SAN CASA DR  
City-St-Zip: ENGLEWOOD, FL 34224

Title: DV ( ) Delete  
Name: BYRNE, TIM  
Address: 9 SPORTSMAN RD  
City-St-Zip: ROTONDA WEST, FL 33947

Title: DS ( ) Delete  
Name: HORVATH, WENDY  
Address: 103 SIDNEY CT  
City-St-Zip: ROTONDA WEST, FL 33947

Title: DD ( ) Delete  
Name: FULLER, LYNN  
Address: 6868 SAN CASA DR  
City-St-Zip: ENGLEWOOD, FL 34224

Title: DT ( ) Delete  
Name: RICHARD, SHAWN  
Address: 9 SPORTSMAN RD  
City-St-Zip: ROTONDA WEST, FL 33947

**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: DS (X) Change ( ) Addition  
Name: CARTER, JACKIE L  
Address: 1000 KINGS HWY #50  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: DD (X) Change ( ) Addition  
Name: CARTER, SAMUEL E  
Address: 1000 KINGS HWY #50  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: DT (X) Change ( ) Addition  
Name: FULLER, LYNN  
Address: 6868 SAN CASA DR  
City-St-Zip: ENGLE WOOD, FL 34224

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: SAMUEL E. CARTER

DD

03/05/2008

Electronic Signature of Signing Officer or Director

Date