2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006966

FILED Jaņ 16, 2<u>00</u>9 Secretary of State

Entity Name: AUBURNDALE YOUTH BASKETBALL LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

1 BLOODHOUND TRAIL AUBURNDALE, FL 33823

Current Mailing Address: New Mailing Address:

P.O. BOX 1732 AUBURNDALE, FL 33823

FEI Number: 59-3479717 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

FUHRMAN, LESLIE 556 BERKLEY POINTE DRIVE AUBURNDALE, FL 33823

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition KEY, JOSEPH KEY, JOSEPH Name: Name: 1421 COUNTY ROAD 335 Address: 151 WHITE OAK LOOP Address:

City-St-Zip: CRANE HILL, AL 35053 City-St-Zip: CULLMAN, AL 35057

(X) Change () Addition Title: VPD () Delete Title: Name: AUERBACHER, BOB Name: FUHRMAN, LESLIE

Address: 105 ARIETTA SHORES DRIVE Address: 556 BERKLEY POINTE DRIVE City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823

Title: TD () Delete Title: () Change () Addition

BOALCH, MIKE Name: Name: Address: 202 WINONA CIRCLE Address: City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition

Name: FUHRMAN, LESLIE Name: DAVIS, CHERYL 566 BERKLEY POINTE DRIVE Address: Address: 1206 32ND ST NW City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: WINTER HAVEN, FL 33881

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: JOSEPH EUGENE KEY PD 01/16/2009