

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000821

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: NORTHSIDE YOUTH FOOTBALL, INC

## Current Principal Place of Business:

2650 N LAKEVIEW DRIVE  
TAMPA, FL 33618

## New Principal Place of Business:

NORTHDALE SOCCER COMPLEX  
NORTHDALE BLVD.  
TAMPA, FL 33624

## Current Mailing Address:

P.O. BOX 272316  
TAMPA, FL 336882316

## New Mailing Address:

P.O. BOX 272316  
TAMPA, FL 33688 US

FEI Number: 48-2483511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COLE, CRYSTAL  
18201 TIVOLI LANE  
LUTZ, FL 33558 US

## Name and Address of New Registered Agent:

BRINK, ROBERT W  
6416 NIKKI LANE  
TAMPA, FL 33625 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: ROBERT W BRINK

04/24/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILLIAMS, KEVIN  
Address: 5711 LEGACY CRESCENT PLACE #202  
City-St-Zip: RIVERVIEW, FL 33578

Title: VPD ( ) Delete  
Name: MAZUR, MARK  
Address: 2801 ORMANDY CT  
City-St-Zip: TAMPA, FL 33618

Title: SD ( ) Delete  
Name: CIMINO, MICHELLE M  
Address: 18906 ARBOR DRIVE  
City-St-Zip: LUTZ, FL 33548

Title: TD (X) Delete  
Name: COLE, CRYSTAL  
Address: 18210 TIVOLI LANE  
City-St-Zip: LUTZ, FL 33558

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MAZUR, MARK  
Address: 2801 ORMANDY CT  
City-St-Zip: TAMPA, FL 33618

Title: TD (X) Change ( ) Addition  
Name: BRINK, ROBERT W  
Address: 6416 NIKKI LANE  
City-St-Zip: TAMPA, FL 33625

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

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: ROBERT W BRINK

DT

04/24/2009

Electronic Signature of Signing Officer or Director

Date