

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000830

FILED
Apr 26, 2006
Secretary of State

Entity Name: NORTHWEST FLORIDA HOCKEY LEAGUE, INC.

Current Principal Place of Business:

50 HIGH POINT DR
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2058
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-3464755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUD, JR, JOSEPH R
P O BOX 2058
50 HIGH POINT DR
GULF BREEZE, FL 32561 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: VD () Delete
Name: VENEZIA, JANINE
Address: 1401PLAYERS CLUB DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: SD () Delete
Name: MCCONNELL, CAROL
Address: 5700 AUDBON
City-St-Zip: PENSACOLA, FL 32504

Title: PD () Delete
Name: HUMBERT, PEGGY
Address: 2009 PLANTATION OAKS DR.
City-St-Zip: GULFBREEZE, FL 32566

Title: TD () Delete
Name: YOUD, JOSEPH R JR
Address: 50 HIGHPOINT DR.
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: DOYLE, CHRISSY
Address: 1261 GRAND RIDGE CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

Title: D () Delete
Name: MCCARRAGHER, BONNIE
Address: 3013 MARCUS PT. BLVD.
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BAIN, JEFF
Address: PO BOX 11804
City-St-Zip: PENSACOLA, FL 32524

Title: VD (X) Change () Addition
Name: GROH, PAUL
Address: 6443 HERONWALK DRIVE
City-St-Zip: GULF BREEZE, FL 32563

Title: SD (X) Change () Addition
Name: DWELLE, JACKIE
Address: 444 BELLE CHASE DRIVE
City-St-Zip: PENSACOLA, FL 32506

Title: TD (X) Change () Addition
Name: MORIARTY, GINA
Address: 26A LIN DRIVE
City-St-Zip: EGLIN AFB, FL 32542

Title: D (X) Change () Addition
Name: KITCH, MICHELLE
Address: 82 LIVE OAK AVE E
City-St-Zip: DEFUNIAK SPRINGS, FL 32435

Title: D (X) Change () Addition
Name: DOYLE, MICHAEL
Address: 1261 GRAND RIDGE CIRCLE
City-St-Zip: GULF BREEZE, FL 32563

I hereby certify that the information supplied with this filing does not qualify for the 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: GINA MORIARTY

TD

04/26/2006

Electronic Signature of Signing Officer or Director

Date