

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004975

FILED  
May 01, 2006  
Secretary of State

**Entity Name:** PARKLAND FLAG FOOTBALL LEAGUE, INC.

**Current Principal Place of Business:**

C/O KEVIN MYERS  
9817 NW 64TH PLACE  
PARKLAND, FL 33067

**New Principal Place of Business:**

**Current Mailing Address:**

C/O KEVIN MYERS  
9817 NW 64TH PLACE  
PARKLAND, FL 33067

**New Mailing Address:**

**FEI Number:** 65-0860144 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

WICH, THOMAS  
2400 EAST COMMERCIAL BLVD.  
SUITE 620  
FORT LAUDERDALE, FL 33308 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DSEC ( ) Delete  
Name: CAMPADONIS, STEVE  
Address: 7982 NW 66TH TERR  
City-St-Zip: PARKLAND, FL 33060

Title: PD ( ) Delete  
Name: MYERS, KEVIN  
Address: 9817 N.W. 64TH PLACE  
City-St-Zip: PARKLAND, FL 33076

Title: D ( ) Delete  
Name: WICH, THOMAS  
Address: 2400 EAST COMMERCIAL BLVD. #620  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: D ( ) Delete  
Name: ROSEN, RICK  
Address: 3751 NW 71ST STREET  
City-St-Zip: COCONUT CREEK, FL 33073

Title: D ( ) Delete  
Name: LEHR, GARY  
Address: 5930 NW 100 WAY  
City-St-Zip: PARKLAND, FL 33076

Title: DVP ( ) Delete  
Name: FITZSIMMONS, BILL  
Address: 6526 NW 97 DRIVE  
City-St-Zip: PARKLAND, FL 33076

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DSEC (X) Change ( ) Addition  
Name: SADER, BOB  
Address: 10902 NW 70TH COURT  
City-St-Zip: PARKLAND, FL 33076

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: ( ) 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 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: THOMAS M WICH

D

05/01/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date