

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2009
Secretary of State

DOCUMENT# N98000006678

Entity Name: INNER CITY YOUTH OF SOUTH FLORIDA-YOUTH ATHLETIC LEAGUE, INC.

Current Principal Place of Business:

1865 N.W. 69 TERRACE
MIAMI, FL 33147

New Principal Place of Business:

Current Mailing Address:

1865 N.W. 69 TERRACE
MIAMI, FL 33147

New Mailing Address:

FEI Number: 65-0943813 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DAWKINS, ANTHONY A
1865 NW 69 TERR
MIAMI, FL 33147 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: FSTD () Delete
Name: MCDUFFIE, LINDA
Address: 2950 NW 171ST STREET
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: WILSON, NICOLA
Address: 1865 NW 69 TERR
City-St-Zip: MIAMI, FL 33147

Title: PDC () Delete
Name: DAWKINS, ANTHONY
Address: 1865 NW 69 TERR
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: COLEBROOK, ARTHUR
Address: 4220 NW 173RD DR
City-St-Zip: MIAMI, FL 33055

Title: VD () Delete
Name: DAWKINS, JOANNE
Address: 1865 NW 69 BTERR
City-St-Zip: MIAMI, FL 33147

Title: D () Delete
Name: MCPHEE, TANEISHA
Address: 7412 NW 22 AVE
City-St-Zip: MIAMI, FL 33147

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GILLAM, FENDRICK III
Address: 1865 NW 69 TERR
City-St-Zip: MIAMI, FL 33147

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

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

Title: VD (X) Change () Addition
Name: DAWKINS, JOANNE
Address: 1865 NW 69 TERR
City-St-Zip: MIAMI, FL 33147

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: LINDA MCDUFFIE

Electronic Signature of Signing Officer or Director

FSTD

01/05/2009

Date