

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91251 018 *****61.25

DOCUMENT # N98000006891

1. Entity Name
ORANGE BELT YOUTH FOOTBALL FEDERATION, INC.



Principal Place of Business
P. O. BOX 616332
ORLANDO, FL 32861-6332

Mailing Address
P. O. BOX 616332
ORLANDO, FL 32861-6332



2. Principal Place of Business
840 W. Kicklighter Rd
Suite, Apt. #, etc.

3. Mailing Address
840 W. Kicklighter Rd
Suite, Apt. #, etc.

04282004 Chg-NP CR2E037 (10/03)

City & State
Lake Helen FL

City & State
Lake Helen FL

4. FEI Number
APPLIED FOR 65-119-5245
Applied For
Not Applicable

Zip
32744
Country
U.S.

Zip
32744
Country
U.S.

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
CHARLTON, ISAAH C III
580 WILMER AVE SUITE C
ORLANDO, FL 32808

7. Name and Address of New Registered Agent
Name
Paulette Smith
Street Address (P.O. Box Number is Not Acceptable)
840 W. Kicklighter Rd
City
Lake Helen FL Zip Code
32744

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Paulette Smith** DATE **4/30/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	☒ Delete
NAME	CHARLTON, ISAAH C III	
STREET ADDRESS	580 WILMER AVE SUITE C	
CITY-ST-ZIP	ORLANDO, FL 32808	
TITLE	VD	☒ Delete
NAME	ROBBINS, JOE	
STREET ADDRESS	41300 DIXIE AVE	
CITY-ST-ZIP	UMATILLA, FL 32784	
TITLE	T	☒ Delete
NAME	STIRFIELD, MIKE	
STREET ADDRESS	21829 ROLLINGWOOD TRAIL	
CITY-ST-ZIP	EUSTIS, FL 32736	
TITLE	S	☒ Delete
NAME	ANDERSON, VANESA	
STREET ADDRESS	1821 WASHINGTON BLVD	
CITY-ST-ZIP	MT DORA, FL 32757	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☐ Change ☐ Addition
NAME	Paulette Smith	
STREET ADDRESS	840 W. Kicklighter Rd	
CITY-ST-ZIP	Lake Helen FL	
TITLE	V-President	☐ Change ☐ Addition
NAME	Donovan Muldrow	
STREET ADDRESS	1821 Washington Blvd	
CITY-ST-ZIP	MT DORA FL 32757	
TITLE	Treasurer	☐ Change ☐ Addition
NAME	Vanessa Anderson	
STREET ADDRESS	1821 Washington Blvd	
CITY-ST-ZIP	MT DORA FL 32757	
TITLE	Board member	☐ Change ☐ Addition
NAME	Joe Robbins	
STREET ADDRESS	41300 Dixie Ave	
CITY-ST-ZIP	UMATILLA FL 32784	
TITLE	Board member	☐ Change ☐ Addition
NAME	Johnnie Saunders	
STREET ADDRESS	361 W. Semiole Ave	
CITY-ST-ZIP	EUSTIS FL 32726	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Paulette Smith** DATE **4/30/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR