

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2005 8:00 am
Secretary of State

02-09-2005 90026 031 ***150.00

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1st MOORE CR2E034 (10/04)

DOCUMENT # P04000129429 1. Entity Name THE NORTHERN LEAGUE IN EDMONTON INCORPORATED					
Principal Place of Business 5150 N. OCEAN DRIVE SINGER ISLAND FL 33404			Mailing Address 5150 N. OCEAN DRIVE SINGER ISLAND FL 33404		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-1619414 <div style="float: right; text-align: right;"> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable </div>	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATE CREATIONS NETWORK INC. 11380 PROSPERITY FARMS ROAD #221E PALM BEACH GARDENS FL 33410			7. Name and Address of New Registered Agent Name P. Daniel Orlich Street Address (P.O. Box Number is Not Acceptable) 5150 N. Ocean Drive City Riviera Beach FL Zip Code 33404		
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. <div style="display: flex; justify-content: space-between;"> <div> SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable</small> </div> <div style="text-align: center;"> P. Daniel Orlich <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div> 2/02/05 <small>DATE</small> </div> </div>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. <input type="checkbox"/> Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORLICH, P. DANIEL <input type="checkbox"/> Delete 5150 N. OCEAN DRIVE SINGER ISLAND FL 33404		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Director/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Ericka Cruise 5150 N. Ocean Drive Riviera Beach, FL... 33404	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	XXXXXXXXXXXXXXXXXXXX <input type="checkbox"/> Delete XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXX XX		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition _____ _____ _____	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete _____ _____ _____		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition _____ _____ _____	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete _____ _____ _____		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition _____ _____ _____	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete _____ _____ _____		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition _____ _____ _____	
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 607, 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 lists empowered.					
SIGNATURE <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			P. Daniel Orlich 2/02/05 305-978-1900 <small>Date Daytime Phone #</small>		