

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 702878

**Entity Name:** POP WARNER MIDGET FOOTBALL ASSOCIATION OF CHARLOTTE COUNTY, INC.**Current Principal Place of Business:**6905 FLORIDA ST  
PUNTA GORDA, FL 33950**Current Mailing Address:**P.O. BOX 512553  
PUNTA GORDA, FL 33951-0944 US**FEI Number: 52-1656210****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**LOGSDON, TAMMY  
2625 LEE ST  
PUNTA GORDA, FL 33950 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: TAMMY LOGSDON****01/13/2014**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P
Name	PERRY, BRYAN MR.
Address	113 COLONIAL ST. SW
City-State-Zip:	PORT CHARLOTTE FL 33952

Title	V
Name	DAY, JOHN
Address	2663 BADGER LANE
City-State-Zip:	NORTH PORT FL 34286

Title	T
Name	LOGSDON, TAMMY
Address	2625 LEE ST
City-State-Zip:	PUNTA GORDA FL 33950

Title	S
Name	JONES, KELLY
Address	835 CONREID DR
City-State-Zip:	PORT CHARLOTTE FL 33952

Title	D, FOOTBALL DIRECTOR
Name	TRIM, GARY
Address	835 CONREID DR
City-State-Zip:	PORT CHARLOTTE FL 33952

Title	D, CHEER DIRECTOR
Name	DODGE, TRICIA
Address	9124 VIVANTE BLVD
City-State-Zip:	PUNTA GORDA FL 33950

I hereby 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 all other like empowered.

**SIGNATURE: TAMMY LOGSDON****TREASURER****01/13/2014**

Electronic Signature of Signing Officer/Director Detail

Date