2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12481

FILED Mar 21, 2006 Secretary of State

Entity Name: EAST CITRUS YOUTH FOOTBALL CONFERENCE, INCORPORATED

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 2933

INVERNESS, FL 326512933 US

Current Mailing Address: New Mailing Address:

P.O. BOX 2933

INVERNESS, FL 344512933 US

FEI Number: 59-3087183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SILCOX, SANDY J PILLSBURY, LINDA M
4525 E SEESE LN
306 W HARVARD ST

FLORAL CITY, FL 34436 US INVERNESS, FL 34452 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: LINDA M PILLSBURY 03/21/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: D'AMBROSIO, VINCENT Name: MOORE, DANA

 Address:
 3229 E GLENN ST
 Address:
 3775 E SANDERS ST

 City-St-Zip:
 INVERNESS, FL 34453 US
 City-St-Zip:
 INVERNESS, FL 34453 US

Title: D () Delete Title: VP (X) Change () Addition Name: IGLESIS, HENRY Name: SUMLIN, CLARA

Address: 6304 E URBAN LN Address: 11703 S TURNER AVE
City-St-Zip: FLORAL CITY, FL 34436 City-St-Zip: FLORAL CITY, FL 34436

Title: T () Delete Title: T (X) Change () Addition

 Name:
 SILCOX, SANDY
 Name:
 PILLSBURY, LINDA M

 Address:
 4525 E SEESE LN
 Address:
 306 W HARVARD ST

 City-St-Zip:
 FLORAL CITY, FL 34436 US
 City-St-Zip:
 INVERNESS, FL 34452 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 RENAU, NANCY
 Name:
 MOORE, ANITA

 Address:
 12900 E TRAILS END
 Address:
 3775 E SANDERS ST

 City-St-Zip:
 FLORAL CITY, FL 34436 US
 City-St-Zip:
 INVERRNESS, FL 34453 US

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: LINDA M PILLSBURY T 03/21/2006