## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 705355** 

Address:

City-St-Zip:

FILED Jan 04, 2008 Secretary of State

Entity Name: BRANDON SPORTS AND AQUATIC CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 405 BEVERLY BLVD BRANDON, FL 33511 US **Current Mailing Address: New Mailing Address:** 405 BEVERLY BLVD BRANDON, FL 33511 US FEI Number: 59-1001300 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DICKEY, DAVID D DICKEY, DAVID D 101 E KÉNNEDY BLVD 518 LAKEWOOD DR BRANDON, FL 33510 US **SUITE 3400** TAMPA, FL 33602 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: DAVID DICKEY 01/04/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition DICKEY, DAVID DICKEY, DAVID Name: Name: 101 E. KENNEDY BLVD., SUITE 3400 Address: 518 LAKEWOOD DR Address: City-St-Zip: TAMPA, FL 33602 US City-St-Zip: BRANDON, FL 33510 US Title: Title: (X) Change ( ) Addition ( ) Delete COLWILL, CHUCK Name: HOVAN, DOUGLAS Name: Address: 4605 CLARKSDALE LANE Address: 3605 CINNAMON TRACE TR City-St-Zip: TAMPA, FL 33605 US City-St-Zip: VALRICO, FL 33594 US Title: () Delete Title: ( ) Change (X) Addition BANKS, PETER Name: Name: 14320 DIPLOMAT DR Address: Address: City-St-Zip: City-St-Zip: TAMPA, FL 33613 US ( ) Change (X) Addition Title: () Delete Title: Name: Name: RUDACILLE, STEVE Address: Address: 2702 ST. CLOUD OAKS DR City-St-Zip: City-St-Zip: VALRICO, FL 33594 US Title: () Delete Title: ( ) Change (X) Addition GREENWELL, SHIRLEY Name: Name: 509 SEFFNER-VALRICP DR Address: Address: City-St-Zip: City-St-Zip: VALRICO, FL 33594 US Title: () Delete Title: ( ) Change (X) Addition TIDLER, STEVE Name: Name:

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.

Address:

City-St-Zip:

408 WEDGEFIELD DR BRANDON, FL 33510 US

SIGNATURE: PETER BANKS S 01/04/2008