

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 05, 2007
Secretary of State**

DOCUMENT# N01011

Entity Name: WING DING SPORTS ASSOCIATION, INC.

Current Principal Place of Business:

9000 NORTH PALAFOX
#29
PENSACOLA, FL 32534

New Principal Place of Business:

Current Mailing Address:

9000 NORTH PALAFOX
#29
PENSACOLA, FL 32534

New Mailing Address:

FEI Number: 59-2916606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBINSON, JOE
9000 N. PALAFOX, #29
PENSACOLA, FL 32534 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBINSON, JOE
Address: 9000 N. PALAFOX, #29
City-St-Zip: PENSACOLA, FL 32534

Title: SD () Delete
Name: HOMELAND, HAROLD
Address: 708 SOUTH G ST.
City-St-Zip: PENSACOLA, FL 32504

Title: D () Delete
Name: REINSCHMIDT, DUTCH
Address: PO BOX 1096
City-St-Zip: GULF BREEZE, FL 32562

Title: D () Delete
Name: ROBINSON, JOE
Address: 9000 PALAFOX HWY, #29
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOE ROBINSON

PD

01/05/2007

Electronic Signature of Signing Officer or Director

_____ Date