2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003390

FILED Apr 30, 2008 Secretary of State

Entity Name: CHARLOTTE COUNTY INLINE HOCKEY ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:			
23530 MARISOL AVE. PT. CHARLOTTE, FL 33954				265 ROTONDA BLVD ROTONDA WEST, FL 33947		
Current Ma	ailing Addres	ss:		New Maili	ling Address:	
23530 MARISOL AVE. PT. CHARLOTTE, FL 33954				265 ROTONDA BLVD ROTONDA WEST, FL 33947		
FEI Number:	06-1690674	FEI Number Applied For()	FEI Nui	mber Not Appl	plicable () Certificate of Status Desired ()	
Name and	Address of C	Current Registered Agent	::	Name and	d Address of New Registered Agent:	
225 W. VIR PUNTA GO The above in the State	of Florida.	950 US	he purpose o	of changing i	its registered office or registered agent, or both,	
SIGNATUF		nic Signature of Registered	Agent		 Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (SLADE, GREG 23530 MARISO PT. CHARLOTT	DL AVE.		Title: Name: Address: City-St-Zip:	D (X) Change () Addition SLADE, GREG 5214 PALANGOS DRIVE PUNTA GORDA, FL 33982	
Title: Name: Address: City-St-Zip:	SMITH, ALLEN 22307 ALCORI			Title: Name: Address: City-St-Zip:	D (X) Change () Addition SMITH, ALLEN 22307 ALCORN AVE. PORT CHARLOTTE, FL 33952	
Title: Name: Address: City-St-Zip:	KEEPERS, TO 2054 LUCKY S			Title: Name: Address: City-St-Zip:	D (X) Change () Addition KEEPERS, TOM 2054 LUCKY ST. PORT CHARLOTTE, FL 33948	
Title: Name: Address: City-St-Zip:	ST (SLADE, KAREN 23530 MARISO PT. CHARLOTT	DL AVE.		Title: Name: Address: City-St-Zip:	P (X) Change () Addition DESSOYE, TOM 265 ROTONDA BLVD ROTONDA WEST, FL 33947	
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	V () Change (X) Addition DESSOYE, BRENDA 265 ROTONDA BLVD ROTONDA WEST, FL 33947	
Title: Name: Address: City-St-Zip:	()) Delete		Title: Name: Address: City-St-Zip:	T () Change (X) Addition GIL, CRYSTAL 9381 BANDERA LANE PORT CHARLOTTE, FL 33981	

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.

SIGNATURE: GREG SLADE D 04/30/2008