

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009056

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: PALADINS ATHLETIC ORGANIZATION, INC.

## Current Principal Place of Business:

699 NE 26TH ST  
STE 1  
WILTON MANORS, FL 33305

## New Principal Place of Business:

2929 NE 6TH AVE  
WILTON MANORS, FL 33334

## Current Mailing Address:

699 NE 26TH ST  
STE 1  
WILTON MANORS, FL 33305

## New Mailing Address:

2929 NE 6TH AVE  
WILTON MANORS, FL 33334

FEI Number: 13-4287176

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

## Name and Address of New Registered Agent:

LAFONTAINE, MARK J MST  
3499 NE 12TH TERRACE  
OAKLAND PARK, FL 33334 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: MARK J. LAFONTAINE, MST

04/21/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GILLUND, RANDY B  
Address: 699 NE 26TH ST STE 1  
City-St-Zip: WILTON MANORS, FL 33305

Title: VD ( ) Delete  
Name: DODDY, LORI A  
Address: 5612 N.W. 49TH AVE  
City-St-Zip: TAMARAC, FL 33319

Title: V ( ) Delete  
Name: SACHS, JEFFERY L  
Address: 699 NE 26TH ST STE 1  
City-St-Zip: WILTON MANORS, FL 33305

Title: TD ( ) Delete  
Name: DUCOTE, DAMIEN N  
Address: 5612 N.W. 49TH AVE  
City-St-Zip: TAMARAC, FL 33319

Title: SD ( ) Delete  
Name: CHARLES, PANTANO  
Address: 2003 NORTH RIVERSIDE DRIVE  
City-St-Zip: POMPANO BEACH, FL 33062

Title: V ( ) Delete  
Name: ANTHONY, GOBLE R  
Address: 2800 NE 2ND TERR  
City-St-Zip: POMPANO BEACH, FL 33064

## 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:

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 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: RANDY B. GILLUND

PD

04/21/2008

Electronic Signature of Signing Officer or Director

Date