

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50776

FILED
Apr 05, 2006
Secretary of State

Entity Name: THE CENTRAL FLORIDA SPORTS COMMISSION, INC.

Current Principal Place of Business:

126 E LUCERNE CIRCLE
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

126 E LUCERNE CIRCLE
ORLANDO, FL 23801 US

New Mailing Address:

FEI Number: 59-3152788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANDY JOHNSON
912 CROTON RD.
CELEBRATION, FL 34747 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: JOHNSON, RANDY
Address: 912 CROTON RD.
City-St-Zip: CELEBRATION, FL 34747

Title: C () Delete
Name: SHAMROCK, KEITH
Address: 2100 LAKE EUSTIS DRIVE
City-St-Zip: TAVARES, FL 32778

Title: CD () Delete
Name: AGUEL, GEORGE
Address: 200 CELEBRATION PLACE 6TH FLOOR
City-St-Zip: CELEBRATION, FL 34747

Title: TSD () Delete
Name: BEUCHER, BOB
Address: 10400-CR 48
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: ED () Delete
Name: SABOOR, JOHN
Address: 1510 LAKE DANIEL DRIVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: C (X) Change () Addition
Name: COOPER, JIM
Address: 315 E. ROBINSON ST. #160
City-St-Zip: ORLANDO, FL 32801

Title: CD (X) Change () Addition
Name: BUONCERVELLO, SONNY
Address: 215 CELEBRATION PLACE #190
City-St-Zip: CELEBRATION, FL 34747

Title: TSD (X) Change () Addition
Name: SKWARLO, BRUCE
Address: 1501 INTERNATIONAL PARKWAY
City-St-Zip: LAKE MARY, FL 32746

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: TODD M. HESS

Electronic Signature of Signing Officer or Director

VP

04/05/2006

Date