## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000004842

FILED Jan 12, 2005 Secretary of State

Entity Name: THE UNITED STATES QUAD RUGBY ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 5861 WHITE CYPRESS DRIVE LAKE WORTH, FL 33467 **Current Mailing Address: New Mailing Address:** 5861 WHITE CYPRESS DRIVE LAKE WORTH, FL 33467 FEI Number: 36-3648503 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: BISHOP, JOHN 5861 WHITE CYPRESS DRIVE LAKE WORTH, FL 33467 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition RAY, CHARLES Name: Name: 13792 NW 22ND STREET Address: Address: City-St-Zip: SUNRISE, FL 33323 City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition Name: SUHR, ED Name: ERSHEK, JOHN Address: 3340 E MORRISION APT 380 Address: 1179 SIMMS HEIGHTS ROAD City-St-Zip: PORTLAND, OR 97214 City-St-Zip: KINGSTON SPRINGS, TN 37082 Title: () Delete Title: (X) Change ( ) Addition GUMBERT, JAMES T BISHOP, JOHN Name: Name: 5861 WHITE CYPRESS DRIVE 11104 SPICEWOOD CLUB DRIVE Address: Address: City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: **AUSTIN. T 78750** Title: (X) Delete Title: () Change () Addition Name: ERSHEK, JOHN Name: 1179 SIMMS HEIGHTS ROAD Address: Address: City-St-Zip: KINGSTON SPRINGS, TN 02053 37 City-St-Zip: Title: (X) Delete Title: () Change () Addition GUMBERT, JAMES T Name: Name: 11104 SPICEWOOD CLUB DRIVE Address: Address: City-St-Zip: AUSTIN, TX 78750 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN ERSHEK T 01/12/2005