

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004842

FILED
Apr 15, 2009
Secretary of State

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

Current Principal Place of Business:

5861 WHITE CYPRESS DRIVE
LAKE WORTH, FL 33467

New Principal Place of Business:

Current Mailing Address:

1179 SIMMS HEIGHTS ROAD
KINGSTON SPRINGS, TN 37082

New Mailing Address:

FEI Number: 36-3648503

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BISHOP, JOHN
5861 WHITE CYPRESS DRIVE
LAKE WORTH, FL 33467 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: S () Delete
Name: CRANDALL, BOB
Address: 14754 SW SCHOLLS FERRY ROAD, APT. 1016
City-St-Zip: BEAVERTON, OR 97007

Title: T () Delete
Name: ERSHEK, JOHN
Address: 1179 SIMMS HEIGHTS ROAD
City-St-Zip: KINGSTON SPRINGS, TN 37082

Title: P () Delete
Name: HOOPER, ED
Address: 5593 CEDAR OAK BLVD.
City-St-Zip: SARASOTA, FL 34233

Title: C () Delete
Name: HAMILL, TOM
Address: 1702 LINCOLN DRIVE
City-St-Zip: VOORHEES, NJ 08043

Title: VP () Delete
Name: CHERRINGTON, WIMSEY
Address: 324 FIFTEENTH AVENUE EAST, SUITE 203
City-St-Zip: SEATTLE, WA 981125194

Title: VP () Delete
Name: REGIER, JASON
Address: 1341 SOUTH MAGNOLIA WAY
City-St-Zip: DENVER, CO 80224

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:

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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: JOHN ERSHEK

T

04/15/2009

Electronic Signature of Signing Officer or Director

Date