

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 25, 2008 8:00 am
Secretary of State

06-25-2008 90010 003 ***150.00

DOCUMENT # P06000096548	
1. Entity Name BALL IN MOTION, INC.	



Principal Place of Business 318 LAURIE ST MELBOURNE, FL 32935	Mailing Address 318 LAURIE ST MELBOURNE, FL 32935
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40109108

2. Principal Place of Business - No P.O. Box # 27 STUMPFIELD RD	3. Mailing Address 27 STUMPFIELD RD
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State PENSACOLA FL	City & State PENSACOLA FL
Zip 32503	Zip 32503
Country	Country

05272008 Chg-P CR2E034 (12/06)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent PEYRET, LOUIS 318 LAURIE ST MELBOURNE, FL 32935	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Louis Peyret* (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PEYRET, LOUIS 318 LAURIE ST MELBOURNE, FL 32935 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HARLAND, KENNETH W 900 W WHITMORE DR MELBOURNE, FL 32935 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP MCADAMS, CURTIS 2629 TRAMMEL AVE MELBOURNE, FL 32935 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Kenneth W. Harland* 6/22/08 3212541242
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #