FILED
Sep 03, 2002 8:00 am
Secretary of State

07-28-2002 90198 004 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000065976

1. Entity Name
ATHLETIC DEVELOPMENT SYSTEMS, INC.

[redacted]

Principal Place of Business	Mailing Address
1204 NE 4 AVE	1204 NE 4 AVE
BOCA RATON FL 33432	BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 65-0438114 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FINNVOLD, ANDERS G
1204 NE 4 AVE
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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.

SIGNATURE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FINNVOLD, ANDERS G 1204 NE 4 AVE BOCA RATON FL 33432	☐ 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

CR2E034 (9/01)

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Anders G Finnvold 7/25/02 561-866-8196
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment 870653

P99 000065976

Florida Department of State
Division of Corporations
P.O. Box 32302-1500

To Whom It May Concern,

I am writing this letter in response to the letter I received from you stating that I owe an additional $400.00. I mailed that paperwork in along with a check for $150.00 as soon as I received it. I did notice that there was a late fee after May 1 as indicated on the sheet, but I received the letter after May 1. I did not call and just assumed that it had been lost in the mail. However you are now telling me that I need to pay a late fee when I received the notice late myself. I would appreciate your attention in this matter to have it resolved as soon as possible. I do not feel I should be penalized for something that came late or was lost in the mail.

Regards,

Gar Finnvold
Athletic Development Systems
1204 NE 4 Ave
Boca Raton, FL, 33432