

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H82586

Entity Name: D B SPORTS, INC.

FILED  
Jun 24, 2009  
Secretary of State

## Current Principal Place of Business:

9242 CYPRESS COVE DR.  
ORLANDO, FL 32819 US

## New Principal Place of Business:

## Current Mailing Address:

9242 CYPRESS COVE DR.  
ORLANDO, FL 32819 US

## New Mailing Address:

FEI Number: 59-2611062

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MAPPLE, DEENA BRUSH  
9242 CYPRESS COVE DR.  
ORLANDO, FL 32819 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MAPPLE, DEENA BRUSH  
Address: 9242 CYPRESS COVE DR.  
City-St-Zip: ORLANDO, FL

Title: VPD ( ) Delete  
Name: MAPPLE, ANDREW H  
Address: 9242 CYPRESS DR.  
City-St-Zip: ORLANDO, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MAPPLE, DEENA BRUSH  
Address: 9242 CYPRESS COVE DR.  
City-St-Zip: ORLANDO, FL 32819 US

Title: VPD (X) Change ( ) Addition  
Name: MAPPLE, ANDREW H  
Address: 9242 CYPRESS DR.  
City-St-Zip: ORLANDO, FL 32819 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEENA MAPPLE

PD

06/24/2009

Electronic Signature of Signing Officer or Director

Date