

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 519746

Entity Name: A & N SPORTS, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

501 SOUTH FRENCH AVENUE
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

501 SOUTH FRENCH AVENUE
SANFORD, FL 32771

New Mailing Address:

FEI Number: 59-1707423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NELSON, C BERTRAM, JR
501 S. FRENCH AVE
SANFORD, FL 32771 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NELSON, C. B. JR.,
Address: 1200 PRESCOTT BLVD.
City-St-Zip: DELTONA, FL

Title: VS () Delete
Name: NELSON, C.B. JR
Address: 1200 PRESCOTT BLVD.
City-St-Zip: DELTONA, FL 32738

Title: T () Delete
Name: NELSON, C. B. JR.,
Address: 1200 PRESCOTT BLVD.
City-St-Zip: DELTONA, FL 32738

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NELSON, C. B. JR.,
Address: 1200 PRESCOTT BLVD.
City-St-Zip: DELTONA, FL 32738 US

Title: VS (X) Change () Addition
Name: NELSON, C.B. JR
Address: 1200 PRESCOTT BLVD.
City-St-Zip: DELTONA, FL 32738 US

Title: T (X) Change () Addition
Name: NELSON, C. B. JR.,
Address: 1200 PRESCOTT BLVD.
City-St-Zip: DELTONA, FL 32738 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: CLAUD B NELSON JR

PD

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date