2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706116

FILED May 03, 2010 Secretary of State

New Principal Place of Business:

Entity Name: CHARLOTTE PLAYERS INC

Current Principal Place of Business:

1225 TAMIAMI TRAIL 1182 MARKET CIRCLE

UNIT B11 PORT CHARLOTTE, FL 33953 US

PORT CHARLOTTE, FL 33953 US

Current Mailing Address: New Mailing Address:

P O BOX 494088

PORT CHARLOTTE, FL 33949 US

FEI Number: 23-7087894 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MOODY, SHERRIE M EXE DIR

1225 TAMIAMI TRAIL

MOODY, SHERRIE M EXE DIR

1182 MARKET CIRCLE

UNIT B-11 PORT CHARLOTTE, FL 33953 US

PORT CHARLOTTE, FL 33953 US

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.

in the State of Florida.

SIGNATURE: 05/03/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: CALLAN, EUGENE J

Address: 26470 RAMPART BLVD, UNIT 122 City-St-Zip: PUNTA GORDA, FL 33983 US

Title: VP

Name: JAMES, LYNNE Address: 8024 ALAN BLVD

City-St-Zip: PUNTA GORDA, FL 33982 US

Title: TRES

Name: ZIEGLER, LYNNE Address: 157 CONCORD NE

City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title:

Name: KOZENKO, SHARYNN Address: 2244 HAYWORTH RD

City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title:

Name: CONSTANCE, CHRISTOPHER
Address: 200 HARBORWALK DRIVE, UNIT #114

City-St-Zip: PUNTA GORDA, FL 33950 US

Title: [

Name: CASTRO, JANET
Address: 2925 MAGDELINA DRIVE
City-St-Zip: PUNTA GORDA, FL 33950 US

I hereby 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 all other like empowered.

SIGNATURE: SHERRIE M. MOODY E. D 05/03/2010