2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# 755662

Entity Name: PENSACOLA SPORTS ASSOCIATION FOUNDATION, INC.

Current Principal Place of Business:

101 W. MAIN STREET
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 12463
PENSACOLA, FL 32591

New Mailing Address:

FEI Number: 59-2113050 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCMAHON, DONALD
375 N. 9TH AVENUE
PENSACOLA, FL 32501 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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	HALL, JIM	
Address:	3350 N. 18TH AVENUE	
City-St-Zip:	PENSACOLA, FL 32503	
Title:	VPD	( ) Delete
Name:	MCMAHON, DONALD	
Address:	375 N. 9TH AVENUE	
City-St-Zip:	PENSACOLA, FL 32501	
Title:	D	( ) Delete
Name:	NOBLE, GREGG	
Address:	900 NORTH 12TH AVENUE	
City-St-Zip:	PENSACOLA, FL 32501	
Title:	TD	( ) Delete
Name:	BAKER, LAVERNE	
Address:	84 BAYBRIDGE DR	
City-St-Zip:	GULF BREEZE, FL 32561	
Title:	D	( ) Delete
Name:	TRINGAS, GARY	
Address:	316 S. BAYLEN ST, SUITE 200	
City-St-Zip:	PENSACOLA, FL 32502	
Title:	SD	( ) Delete
Name:	PAPADELIAS, ANN	
Address:	2669 BAYOU BLVD.	
City-St-Zip:	PENSACOLA, FL 32503	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	MCKINNEY, REX	
Address:	400 W. GARDEN STREET	
City-St-Zip:	PENSACOLA, FL 32502	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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

SIGNATURE: JIM HALL PD 04/30/2008

Electronic Signature of Signing Officer or Director — Date