## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT#762102** 

FILED Oct 09, 2007 Secretary of State

Entity Name: RAM FOOTBALL CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

ONE RAM WAY SARASOTA, FL 34231

**Current Mailing Address: New Mailing Address:** 

4830 SWEET SHADE DRIVE 2104 FLORINDA STREET SARASOTA, FL 34241 SARASOTA, FL 34231

FEI Number: 59-2191420 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SPRAGUE, JOHN C 7328 PALÓMINO LANE SARASOTA, FL 34241 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete LEVANTI, KENNETH R LEVANTI, KENNETH R Name: Name:

2937 BEE RIDGE ROAD, SUITE 10 Address: 4830 SWEET SHADE DRIVE Address: City-St-Zip: SARASOTA, FL 34239 City-St-Zip: SARASOTA, FL 34241

Title: () Delete Title: (X) Change ( ) Addition

LEVANTI, SHEREE L Name: BAILEY, JANET Name: Address: 4830 SWEET SHADE DRIVE Address: 2104 FLORINDA STREET City-St-Zip: SARASOTA, FL 34241 City-St-Zip: SARASOTA, FL 34231

Title: () Delete Title: () Change () Addition SPRAGUE, JOHN C Name: Name:

Address: 7328 PALOMINO LANE Address: City-St-Zip: SARASOTA, FL 34241 City-St-Zip:

Title: SD (X) Delete Title: () Change () Addition

Name: DOWDEN, KATHY Name: Address: 16100 RAWLS ROAD Address: City-St-Zip: SARASOTA, FL 34240 City-St-Zip:

Title: () Delete Title: () Change () Addition

SPRAGUE, JOHN C., Name: Name: 3985 HELENE ST Address: Address: City-St-Zip: SARASOTA, FL 00000, City-St-Zip:

Title: () Delete Title: () Change () Addition

TELLO-ACCOLA, BARBARA Name: Name: Address: 4894 POST POINT DRIVE Address: SARASOTA, FL 34233 City-St-Zip: 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: KENNETH R. LEVANTI PD 10/09/2007