

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765027

FILED
Jan 29, 2008
Secretary of State

Entity Name: WORLD SPORTS, INC.

Current Principal Place of Business:

9220 BONITA BEACH RD
SUITE 209
BONITA SPRINGS, FL 34135 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 2607
BONITA SPRINGS, FL 34133 US

New Mailing Address:

FEI Number: 59-2229691

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KREIDER, DOUG
1220 E. CONCORD ST
ORLANDO, FL 32803 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: D () Delete
Name: CARR, AUSTIN
Address: 1313 PONCE DE LEON BLVD SUITE 200
City-St-Zip: CORAL GABLES, FL 33134

Title: D () Delete
Name: CARRIER, ROSS
Address: 25140 MARSH LANDINGS PKWY
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: PD () Delete
Name: WAXER, EDWARD,
Address: P.O. BOX 2607 N/A
City-St-Zip: BONITA SPRINGS, FL 34133

Title: DV () Delete
Name: DAVIDSON, HARPER,
Address: 4536 SAN AMARO DR
City-St-Zip: CORAL GABLES, FL

Title: T () Delete
Name: DRAKE, CARY
Address: 19 RIDGEDALE
City-St-Zip: SUMMIT, NY

Title: SD () Delete
Name: SMITH, ROLAND A
Address: 629 SW 6TH ST NE-13
City-St-Zip: POMPANO BEACH, FL 33060

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
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: EDWARD WAXER

PRES

01/29/2008

Electronic Signature of Signing Officer or Director

Date