

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000004399

Entity Name: EASTON SPORTS, INC.

FILED
Feb 11, 2004
Secretary of State

Current Principal Place of Business:

7855 HASKELL AVENUE, SUITE 202
VAN NUYS, CA 91406

New Principal Place of Business:

Current Mailing Address:

7855 HASKELL AVENUE, SUITE 202
VAN NUYS, CA 91406

New Mailing Address:

FEI Number: 95-4006570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PALMA, ANTHONY M
Address: 7855 HASKELL AVENUE, SUITE 202
City-St-Zip: VAN NUYS, CA 91406

Title: V () Delete
Name: HARRINGTON, JOHN
Address: 7855 HASKELL AVENUE, SUITE 202
City-St-Zip: VAN NUYS, CA 91406

Title: V () Delete
Name: GOLDSMITH, EDWARD
Address: 7855 HASKELL AVENUE, SUITE 202
City-St-Zip: VAN NUYS, CA 91406

Title: V () Delete
Name: DOUD, JAMIE
Address: 7855 HASKELL AVENUE, SUITE 202
City-St-Zip: VAN NUYS, CA 91406

Title: V () Delete
Name: FIRTH, LARRY
Address: 7855 HASKELL AVENUE, SUITE 202
City-St-Zip: VAN NUYS, CA 91406

Title: V () Delete
Name: WALTRIP, KENNETH
Address: 7855 HASKELL AVENUE, SUITE 202
City-St-Zip: VAN NUYS, CA 91406

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: () 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 for the exemption stated in Section 119.07(3)(i), 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: ANTHONY M. PALMA

PD

02/11/2004

Electronic Signature of Signing Officer or Director

_____ Date