

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000002112

FILED
Feb 15, 2011
Secretary of State

Entity Name: EASTON SPORTS DEVELOPMENT FOUNDATION CORP.

Current Principal Place of Business:

7855 HASKELL AVE SUITE 360
VAN NUYS, CA 91406

New Principal Place of Business:

7855 HASKELL AVE SUITE 350
VAN NUYS, CA 91406

Current Mailing Address:

7855 HASKELL AVE SUITE 350
VAN NUYS, CA 91406

New Mailing Address:

FEI Number: 95-3750153

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR SUITE A
TALLAHASSEE, FL 32301 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: CP
Name: EASTON, JAMES L
Address: 7855 HASKELL AVE SUITE 360
City-St-Zip: VAN NUYS, CA 91406

Title: DS
Name: EASTON, GREG
Address: 7855 HASKELL AVE SUITE 360
City-St-Zip: VAN NUYS, CA 91406

Title: D
Name: WATTS, ERIK
Address: 7855 HASKELL AVE SUITE 360
City-St-Zip: VAN NUYS, CA 91406

Title: DT
Name: SAWYER, CAREN
Address: 7855 HASKELL AVE SUITE 360
City-St-Zip: VAN NUYS, CA 91406

Title: VPD
Name: RABSKA, DON
Address: 7855 HASKELL AVE SUITE 360
City-St-Zip: VAN NUYS, CA 91406

Title: AS
Name: GRIFFIN, KAREN
Address: 7855 HASKELL AVE SUITE 360
City-St-Zip: VAN NUYS, CA 91406

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

SIGNATURE: CAREN SAWYER

DT

02/15/2011

Electronic Signature of Signing Officer or Director

Date