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FILED
May 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000005027 (6)
1. Corporation Name
EAST COAST HOCKEY LEAGUE, INC.



Principal Place of Business: C/O SCOTT SABATINO, 125 VILLAGE BLVD., STE 210, PRINCETON NJ 08540
Mailing Address: C/O SCOTT SABATINO, 125 VILLAGE BLVD., STE 210, PRINCETON NJ 08540

3. Date Incorporated or Qualified: 10/13/1995
4. FEI Number: 54-1472984
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business (21-24) and Mailing Address (25-30) fields for Suite, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
LANE, LARRY
C/O JACKSONVILLE HOCKEY CLUB
5569-7 BOWDEN ROAD
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent
81 Name: CHARLES FELIX
82 Street Address (P.O. Box Number is Not Acceptable): 201 E GREGORY ST - REAR
83: C/O PENSACOLA ICE PILOTS
84 City: PENSACOLA FL 85 Zip Code: 32501

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE: [Signature] DATE: 4/15/98

12. OFFICERS AND DIRECTORS

| | | |
|----------------|---|---------------------------------|
| TITLE | PD | <input type="checkbox"/> DELETE |
| NAME | ADAMS, RICHARD | |
| STREET ADDRESS | 125 VILLAGE BLVD STE 210 | |
| CITY-ST-ZIP | PRINCETON NJ | |
| TITLE | V | <input type="checkbox"/> DELETE |
| NAME | SABATINO, SCOTT | |
| STREET ADDRESS | 125 VILLAGE BLVD STE 210 | |
| CITY-ST-ZIP | PRINCETON NJ | |
| TITLE | SD | <input type="checkbox"/> DELETE |
| NAME | PRICE, DOUG | |
| STREET ADDRESS | 125 VILLAGE BLVD STE 210 | |
| CITY-ST-ZIP | PRINCETON NJ | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | FELIX, CHARLES | |
| STREET ADDRESS | 201 E GREGORY ST - REAR | |
| CITY-ST-ZIP | PENSACOLA FL | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | CLARKSON, ART | |
| STREET ADDRESS | BIRMINGHAM-JEFFERSON CMC CNTR 19TH ST N | |
| CITY-ST-ZIP | BIRMINGHAM AL | |
| TITLE | CD | <input type="checkbox"/> DELETE |
| NAME | SCHEER, CARL | |
| STREET ADDRESS | 800 EAST BLVD | |
| CITY-ST-ZIP | CHARLOTTE NC | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|--------------------|---|
| 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME | |
| 1.3 STREET ADDRESS | |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY-ST-ZIP | |
| 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: 3/31/98

CR2E037 (10/97)