

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038767

Entity Name: C.H. SPORTS, LLC

FILED
Apr 12, 2005
Secretary of State

Current Principal Place of Business:

3580 EVANS AVE
FT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

9241 INDEPENDENCE WAY
FT MYERS, FL 33912

New Mailing Address:

9241 INDEPENDENCE WAY
FT MYERS, FL 33913

FEI Number: 20-1195447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOUCHER, KIRK R
9241 INDEPENDENCE WAY
FT MYERS, FL 33912 US

Name and Address of New Registered Agent:

BOUCHER, KIRK R
9241 INDEPENDENCE WAY
FT MYERS, FL 33913 US

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: KIRK R. BOUCHER

04/12/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BOUCHER, KIRK R
Address: 9241 INDEPENDENCE WAY
City-St-Zip: FT MYERS, FL 33912 US

Title: MGR () Delete
Name: METZ, KEELI
Address: 591 MILL RIVER RD.
City-St-Zip: ST. ALBANS, VT 05478

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BOUCHER, KIRK R
Address: 9241 INDEPENDENCE WAY
City-St-Zip: FT MYERS, FL 33913 US

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KEELI O. METZ

MGR

04/12/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date