

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L11908

FILED
Apr 26, 2007
Secretary of State

Entity Name: WARNER SPORTS PROMOTIONS, INC.

Current Principal Place of Business:

1695 METROPOLITAN CIRCLE
#4
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

1695-4 METROPOLITAN CIRCLE
TALLAHASSEE, FL 32308 US

Current Mailing Address:

7125 OX BOW CIR
TALLAHASSEE, FL 32312 US

New Mailing Address:

1695-4 METROPOLITAN
TALLAHASSEE, FL 32308 US

FEI Number: 59-2969133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARNER, ANDREW
7125 OX BOW CIR
TALLAHASSEE, FL 32312 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: P () Delete
Name: WARNER, ANDREW,
Address: 7125 OX BOW CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

Title: DVT () Delete
Name: WARNER, LISA M.,
Address: 7125 OX BOW CIRCLE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: LISA M. WARNER

VP

04/26/2007

Electronic Signature of Signing Officer or Director

Date