


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2008 8:00 am
Secretary of State

03-26-2008 90029 001 ****61.25

DOCUMENT # N00000002824 1. Entity Name MERRITT ISLAND SPORTS ASSOCIATION, INC.					
Principal Place of Business 445 E MERRITT ISLAND CSWY MERRITT ISLAND, FL 32952			Mailing Address PO BOX 540127 MERRITT ISLAND, FL 32954-1255		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3688129	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ERDMAN, MIKE 445 E MERRITT ISLAND CSWY MERRITT ISLAND, FL 32952			Name Street Address (P.O. Box Number is Not Acceptable) City		
			State FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ERDMAN, MIKE		NAME	445	
STREET ADDRESS	445 E MERRITT ISLAND CSWY		STREET ADDRESS	445	
CITY-ST-ZIP	MERRITT ISLAND, FL 32952		CITY-ST-ZIP	445	
TITLE	TD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BEARDALL, JAY		NAME	Baxter, Beth	
STREET ADDRESS	405 RIO VISTA LANE		STREET ADDRESS	116 Oak Grove Ln.	
CITY-ST-ZIP	MERRITT ISLAND, FL 32952		CITY-ST-ZIP	Merritt Island, FL 32952	
TITLE	C	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	COLLINS, KERRY		NAME	Waldron, Mike	
STREET ADDRESS	1515 SYKES CREEK DR		STREET ADDRESS	1770 Harbor Oaks Place	
CITY-ST-ZIP	MERRITT ISLAND, FL 32953		CITY-ST-ZIP	Merritt Island, FL 32952	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			3/21/08 Date		
			321-453-2050 Daytime Phone #		

50001950



03212008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-3688129

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

State **FL** Zip Code

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\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

ERDMAN, MIKE

445 E MERRITT ISLAND CSWY

MERRITT ISLAND, FL 32952

☒ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TD

Baxter, Beth

116 Oak Grove Ln.

Merritt Island, FL 32952

☐ Change ☒ Addition

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STREET ADDRESS

CITY-ST-ZIP

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Merritt Island, FL 32952

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3/21/08 Date

321-453-2050 Daytime Phone #