

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000006116

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: BAD CAT WRESTLING CLUB, INC.

Current Principal Place of Business:

2868 MEADOW WOOD DRIVE
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2637 WESTVIEW CT
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 59-3671169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TURTZO, CRAIG
2637 WESTVIEW CT
CLEARWATER, FL 33761

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: D () Delete
Name: TURTZO, CRAIG
Address: 2637 WESTVIEW COURT
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: TURTZO, SANDRA
Address: 2637 WESTVIEW COURT
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: FLOOD, JAYNE E
Address: 3029 ASHLAND TERRACE
City-St-Zip: CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG TURTZO

D

05/01/2002

Electronic Signature of Signing Officer or Director

Date