

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

4/26/02

FILED
Jun 07, 2004 8:00 am
Secretary of State

04-26-2004 90484 018 ****61.25

DOCUMENT # N00000006116					
1. Entity Name BAD CAT WRESTLING CLUB, INC.					
Principal Place of Business 2868 MEADOW WOOD DRIVE CLEARWATER, FL 33761			Mailing Address 2963 WENTWORTH WAY TARPON SPRINGS, FL 34688		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country			
4. FEI Number 59-3671169					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent TURTZO, CRAIG 2637 WESTVIEW CT CLEARWATER, FL 33761					
7. Name and Address of New Registered Agent					
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, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALLER, JAMIE MRS. 2963 WENTWORTH WAY TARPON SPRINGS, FL 34688	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOLL, DON MR. 115 SOUTH SPRING BLVD TARPON SPRINGS, FL 34689	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dave Mr. 3474 Rolling Tr. Palm Harbor, FL 34684	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE MUNZIO, PETE MR. 3001 LEPRECHAUN LANE PALM HARBOR, FL 34683	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS Malissa Castell 3275 Malbar Clearwater, FL 33761	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Glenn Goodman 2868 Meadow Wood Dr. Clearwater, FL 33761	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	☐ Change ☐ Addition
12. 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 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: <u>Jamie Walker</u> JAMIE WALKER <u>4/7/04 (727) 944-4229</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					