

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007297

FILED  
Jan 19, 2006  
Secretary of State

Entity Name: FLORIDA FIREFIGHTER GAMES, INC.

## Current Principal Place of Business:

500 LAKE FRANCIS ROAD  
LAKE PLACID, FL 33852

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 608792  
ORLANDO, FL 32860

## New Mailing Address:

FEI Number: 59-3686219

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHERR, SCOTT  
360 LAKE KATHRYN CIRCLE  
CASSELBERRY, FL 32707 US

## Name and Address of New Registered Agent:

PENA, ORLANDO R VP  
8000 NW 21 ST, SUITE 200  
MIAMI, FL 33122 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: ORLANDO PENA

01/19/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BALLAS, BLACKIE  
Address: 500 LAKE FRANCIS RD  
City-St-Zip: LAKE PLACID, FL 33852

Title: VP ( ) Delete  
Name: PENA, ORLANDO  
Address: 10950 NW 64TH DR  
City-St-Zip: PARKLAND, FL 33076

Title: S ( ) Delete  
Name: SCHERR, SCOTT  
Address: 360 LAKE KATHRYN  
City-St-Zip: CASSELBERRY, FL 32707

Title: T ( ) Delete  
Name: MUELLER, CRAIG  
Address: 2719 SE 23RD AVENUE  
City-St-Zip: OCALA, FL 34471

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change ( ) Addition  
Name: HANNA, KEVIN  
Address: 500 LAKE FRANCIS ROAD  
City-St-Zip: LAKE PLACID, FL 33852

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

SIGNATURE: ORLANDO PENA

VP

01/19/2006

Electronic Signature of Signing Officer or Director

Date