2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 20, 2006
Secretary of State

DOCUMENT# N01000002861

Entity Name: FLORIDA SCHOLASTIC CHESS LEAGUE, INC.

Current Principal Place of Business:

4415 NW 32ND PLACE
GAINESVILLE, FL 32606

New Principal Place of Business:

Current Mailing Address:

4415 NW 32ND PLACE
GAINESVILLE, FL 32606

New Mailing Address:

FEI Number: 59-3632498 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIZUB, DONNA
11217 NW 36TH AVENUE
GAINESVILLE, FL 32606 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

OFFICERS AND DIRECTORS:

Title: C ( ) Delete
Name: DEWITT, MONICA
Address: 2012 NW 21ST STREET
City-St-Zip: GAINESVILLE, FL 32605

Title: T ( ) Delete
Name: BIZUB, DONNA
Address: 11217 NW 36TH AVE
City-St-Zip: GAINESVILLE, FL 32606

Title: P ( ) Delete
Name: ELIZABETH, TEJEDA
Address: 733 E 57TH STREET
City-St-Zip: HILALEAH, FL 33013

Title: V ( ) Delete
Name: TAYLOR, WILLARD
Address: 103 DRUID HILLS ROAD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: S ( ) Delete
Name: MCCUE, CHRIS
Address: 6311 NE 22ND AVENUE
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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:

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

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

Title: DC ( ) Change (X) Addition
Name: PYNE, GEORGE
Address: 3539 NW 39TH AVENUE
City-St-Zip: GAINESVILLE, FL 32605

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: DONNA BIZUB T 10/20/2006
Electronic Signature of Signing Officer or Director — Date