

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004471

FILED  
Apr 27, 2005  
Secretary of State

**Entity Name:** THE FEDERATED SPORTS & AFFILIATES, INC.

**Current Principal Place of Business:**

4301 SPANISH TRAIL  
PENSACOLA, FL 32504

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 93  
CANTONMENT, FL 32533

**New Mailing Address:**

**FEI Number:** 59-3758366

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BYRD, RAYMOND F  
2496 HANDY ROAD  
CANTONMENT, FL 32533 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: D ( ) Delete  
Name: JONES, ROY JR  
Address: 2410 FARRIS AVENUE  
City-St-Zip: PENSACOLA, FL 32526

Title: PD ( ) Delete  
Name: BYRD, RAYMOND F  
Address: 2496 HANOVY ROAD  
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete  
Name: ADAMS, BILL  
Address: 5549 LILAC AVE  
City-St-Zip: MILTON, FL 32570

Title: D ( ) Delete  
Name: HOLBERT, KENNETH DR  
Address: 6708 BEAUDRY LANE  
City-St-Zip: MILTON, FL 32570

Title: ST ( ) Delete  
Name: HALLFORD, CAROL L  
Address: 2429 HANDY ROAD  
City-St-Zip: CANTONMENT, FL 32533

Title: V ( ) Delete  
Name: HALLFORD, ROBBIE  
Address: 2429 HANDY ROAD  
City-St-Zip: CANTONMENT, FL 32533

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: PD (X) Change ( ) Addition  
Name: BYRD, RAYMOND F  
Address: 2496 HANDY ROAD  
City-St-Zip: CANTONMENT, FL 32533

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

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

Title: ST (X) Change ( ) Addition  
Name: HALLFORD, CAROL L  
Address: 8100 BROOMES RD  
City-St-Zip: CENTURY, FL 32535

Title: V (X) Change ( ) Addition  
Name: HALLFORD, ROBBIE  
Address: 8100 BROOMES ROAD  
City-St-Zip: CENTURY, FL 32535

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: CAROL HALLFORD

ST

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date