

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005481

FILED
Jun 06, 2008
Secretary of State

Entity Name: BAY AREA MERCHANTS SPORTS INC.

Current Principal Place of Business:

6804 MORNINGSUN COURT
NEW PORT RICHEY, FL 34655 US

New Principal Place of Business:

Current Mailing Address:

6804 MORNINGSUN COURT
NEW PORT RICHEY, FL 34655 US

New Mailing Address:

FEI Number: 31-1786696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SLAUGHTER, ROBERT G
6804 MORNINGSUN COURT
NEW PORT RICHEY, FL 34655 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SLAUGHTER, ROBERT G
Address: 6804 MORNINGSUN CT.
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: VD () Delete
Name: SLAUGHTER, MELINDA A
Address: 6804 MORNINGSUN CT.
City-St-Zip: NEW PORT RICHEY, FL 34655 US

Title: D () Delete
Name: DOWDELL, JAMES
Address: 4981 QUILL COURT
City-St-Zip: PALM HARBOR, FL 34685 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: CUSTONS, BRUCE
Address: 6469 TAEDA DRIVE
City-St-Zip: SARASOTA, FL 34241 US

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT SLAUGHTER

PD

06/06/2008

Electronic Signature of Signing Officer or Director

Date