

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008846

FILED
Jan 22, 2004
Secretary of State**Entity Name:** FLORIDA LACROSSE CLASSIC, INC.**Current Principal Place of Business:**500 NE SPANISH RIVER BLVD, STE. 12
BOCA RATON, FL 33431**New Principal Place of Business:****Current Mailing Address:**500 NE SPANISH RIVER BLVD, STE. 12
BOCA RATON, FL 33431**New Mailing Address:****FEI Number:** 80-0024170**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CLINTON, DONALD J
500 NE SPANISH RIVER BLVD, STE. 12
BOCA RATON, FL 33431**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: P () Delete
Name: BARBA, RICHARD
Address: 5425 NW 24TH ST., SUITE 208
City-St-Zip: MARGATE, FL 33063

Title: S () Delete
Name: MCGOUGH, THOMAS
Address: 5425 NW 24TH ST., SUITE 208
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: CLINTON, DONALD J
Address: 500 NE SPANISH RIVER BLVD #12
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: SMITH, GARY G
Address: 500 NE SPANISH RIVER BLVD #12
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: CLINTON, BRIAN R
Address: 500 NE SPANISH RIVER BLVD #12
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: LYMBER, GREG
Address: 2801 NW 22ND TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

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: () 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 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: GARY G. SMITH

D

01/22/2004

Electronic Signature of Signing Officer or Director

Date