2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 25, 2006 8:00 am Secretary of State

07-03-2006 90001 049 ****61 25

DOCUMENT # N0200005006 1. Entity Name THE ANTIOCH REDSKINS OF PLANT CITY INC.								 	07-03-200	16 90001 C	J49 ***	····61.25
Principal Place of Business 8604 FRANKLIN RD. PLANT CITY, FL 33565			P.O. E	Mailing Address P.O. BOX 210 SEFFNER, FL 33584				66022176				
2. Principal Place of Business			3. Maiti	3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.					06272006	Chg-NP	CR2E03	7 (4/06)	
City & State			City	City & State				4. FEI Numbe 59-286	3410			oplied For at Applicable
Zip	Zip Country		Zip	Zip				5. Certificate	of Status Desired		8.75 Add	
	6. Name	and Address of Current	Registere	d Agent				7. Name and	Address of New	Registered Ag	ent	
DILPORT,	TRACY N	A				Neme-	leat		zinaham	<u> </u>		
P.O. BOX	1873			Street Adv			ddress (P.O. Box Number	r is Not Acceptabl	e)		***
BRANDON	1, FL 335	09-1873				 0			x1 			
						City	an	+ City		FL	2 3 3 4	565
		y submits this statement for tered agent.	or the purpo 1ℓ ,	ose of changing its	register	ed office o	r register	3. 1	h, in the State of Fi	orida. I am far	miliar with,	and accept
SIGNATURE.	Signatura	2 or priving name of regularion agent	1 ave 1882 1 app	(MO)	T: Pegister	ed Agens signer	ture required		<u>an</u>	DATE	$\mathcal{O}^{\cdot \mathcal{O}_{0}}$	Ω
	Filing Fe	or Is \$61.25 ptember 6, 2006	I and Mile II appl	9. Election Ca Trust Fund	mpaign I	Financing	2 <u>/ L</u>		. N	DATE Aake check prida Departur		
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12. I nereby certify that the information supplied with this tiling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. If urther certify that the information indicated on this report or suppliemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

GUATORE AND TYPED ON PRINTED INDICED SIGNING OF ACEN ON DIRECTOR

Heather L. Bingham

4)7/00 659-00