


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 09, 2007 08:00 A
Secretary of State

DOCUMENT # N02000005006 1. Entity Name THE ANTIOCH REDSKINS OF PLANT CITY INC.	
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Principal Place of Business 8604 FRANKLIN RD. PLANT CITY, FL 33565	Mailing Address P.O. BOX 210 SEFFNER, FL 33584
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DO NOT WRITE IN THIS SPACE



04302007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2863410	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

8. Name and Address of Current Registered Agent BINGHAM, HEATHER 6317 BARTON RD PLANT CITY, FL 33565

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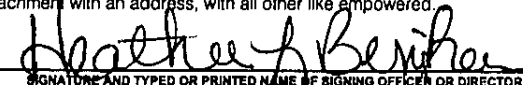
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WALL, RANDY 3323 CHARLES WALL LANE PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WHITMORE, DEBBIE 6516 IKE SMITH PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BINGHAM, HEATHER L 6317 BARTON RD. PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CULLINS, BECKI 6402 N FLETCHER RD PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROGERS, CHUCK 3829 DOVE RUN ROAD PLANT CITY, FL 33565
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000763023
05/29/07-80038-002 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 	4/30/07	813-478-4247
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		