## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000008564

MIAMI, FL 33156

City-St-Zip:

ITHED LACDOSSE CHAID INC

FILED Jan 27, 2009 Secretary of State

Entity Name: MIAMI PANTHER LACROSSE CLUB INC. **Current Principal Place of Business: New Principal Place of Business:** 12800 S.W. 69TH COURT MIAMI, FL 33156 **Current Mailing Address: New Mailing Address:** 12800 S.W. 69TH COURT MIAMI, FL 33156 FEI Number: 30-0135475 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BURG, PETER 12800 S.W. 69TH COURT MIAMI, FL 33156 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BURG, PETER Name: Name: Address: 12800 S.W. 69TH COURT Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: DE LA FE, ERNIE Name: Address: 6601 S.W. 116 STREET Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition CRITTENDEN, ISELA Name: CRITTENDEN, ISELA (LISA) Name: 9701 S.W. 72 COURT 9701 S.W. 72 COURT Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: MIAMI, FL 33156 Title: ( ) Delete Title: () Change () Addition MAYER, LAUREN Name: Name: 6820 S.W. 129 TERRACE Address: Address: City-St-Zip: MAIMI, FL 33156 City-St-Zip: Title: Title: () Delete () Change () Addition SCHAEFER, LYNNE Name: Name: 12085 S.W. 65 AVENUE Address: Address:

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.

City-St-Zip:

SIGNATURE: ISELA CRITTENDEN TRES 01/27/2009