

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002182

FILED
Jul 13, 2007
Secretary of State

Entity Name: THE BOONE SPORTS LEGACY BOARD, INC.

Current Principal Place of Business:

2000 SOUTH MILLS AVE.
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

2000 SOUTH MILLS AVE.
ORLANDO, FL 32806

New Mailing Address:

924 N. MAGNOLIA AVENUE
SUITE 320
ORLANDO, FL 32803

FEI Number: 57-1166744 **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:

BERNIER, CHRISTOPHER S MR.
2000 SOUTH MILLS AVE.
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

PORTER, THOMAS J MR.
924 N. MAGNOLIA AVENUE
SUITE 320
ORLANDO, FL 32803 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: THOMAS J. PORTER

07/13/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PORTER, THOMAS J
Address: 924 N MAGNOLIA AVENUE, SUITE 320
City-St-Zip: ORLANDO, FL 32803

Title: VP () Delete
Name: LITCHFORD, HAL
Address: 1003 RIDGECREST ROAD
City-St-Zip: ORLANDO, FL 32801

Title: T () Delete
Name: BURDEN, JOHN
Address: 1389 WALD ROAD
City-St-Zip: ORLANDO, FL 32806

Title: S () Delete
Name: HUHN, YOLANDA
Address: 1610 WATERWITCH ERIVE
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: SMITH, RANDY
Address: 2811 KEYSTONE DRIVE
City-St-Zip: ORLANDO, FL 32806

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

Title: S (X) Change () Addition
Name: UNCAPPER, SUSANNE
Address: 1625 PINE BLUFF AVENUE
City-St-Zip: ORLANDO, FL 32806

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: THOMAS J. PORTER

PRES

07/13/2007

Electronic Signature of Signing Officer or Director

Date