

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Aug 17, 2005
Secretary of State**

DOCUMENT# N03000008447

Entity Name: CLUB FLORIDA VOLLEYBALL, INC.

Current Principal Place of Business:

3840 NW 122 TERRACE
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

3840 NW 122 TERRACE
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 20-0293009 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:

REYES, RICK
3840 NW 122 TERRACE
SUNRISE, FL 33323 US

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: REYES, RICK
Address: 3840 NW 122 TERRACE
City-St-Zip: SUNRISE, FL 33323

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: REYES, JAIME
Address: 3840 NW 122 TER
City-St-Zip: SUNRISE, FL 33323

Title: OFF () Change (X) Addition
Name: LOWE, APRIL
Address: 3840 NW 122 TER
City-St-Zip: SUNRISE, FL 33323

Title: OFF () Change (X) Addition
Name: D'ANNUNZIO, KATHRYN
Address: 3840 NW 122 TER
City-St-Zip: SUNRISE, FL 33323

Title: OFF () Change (X) Addition
Name: BENJAMIN, LORI
Address: 3840 NW 122 TER
City-St-Zip: SUNRISE, FL 33323

Title: OFF () Change (X) Addition
Name: ADAMS, PATRICIA
Address: 3840 NW 122 TER
City-St-Zip: SUNRISE, FL 33323

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: RICK REYES

P

08/17/2005

Electronic Signature of Signing Officer or Director

Date