# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 04, 2006**
**Secretary of State**

DOCUMENT# N03000008959

**Entity Name:** CORAL SPRINGS RED WINGS BASEBALL CLUB, INC.

**Current Principal Place of Business:**

2605 NW 115 DRIVE
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

10864 N.W. 17 PLACE
CORAL SPRINGS, FL 33071

**Current Mailing Address:**

2605 NW 115 DRIVE
CORAL SPRINGS, FL 33065

**New Mailing Address:**

10864 N.W. 17 PLACE
CORAL SPRINGS, FL 33071

**FEI Number: 16-1686375** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MARSIT, NICHOLAS
2605 NW 115 DRIVE
CORAL SPRINGS, FL 33065 US

**Name and Address of New Registered Agent:**

MARSIT, NICHOLAS
10864 N.W. 17 PLACE
CORAL SPRINGS, FL 33071 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: _____ 04/04/2006
Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: OHL, ANDREW
Address: 2720 NW 83 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: STD ( ) Delete
Name: MARSIT, NICHOLAS
Address: 2720 NW 83 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD ( ) Delete
Name: CHRISTENSEN, HARRY
Address: 2619 NW 123 AVE
City-St-Zip: CORAL SPRINGS, FL 33065

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: STD (X) Change ( ) Addition
Name: MARSIT, NICHOLAS
Address: 10864 N.W. 17 PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREW OHL PD 04/04/2006
Electronic Signature of Signing Officer or Director — Date