

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009055

FILED  
Jan 16, 2009  
Secretary of State

Entity Name: SPORTS MY CHOICE INC.

## Current Principal Place of Business:

2532 WHISPER WAY  
TALLAHASSEE, FL 32308

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 14562  
TALLAHASSEE, FL 32317

## New Mailing Address:

FEI Number: 65-1204908

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THURSTON, LEWIS S  
2532 WHISPER WAY  
TALLAHASSEE, FL 32308 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: CEO ( ) Delete  
Name: THURSTON, LEWIS S  
Address: 2532 WHISPER WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: CFO ( ) Delete  
Name: THURSTON, LEWIS S  
Address: 2532 WHISPER WAY  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VD ( ) Delete  
Name: SMITH, BRIAN  
Address: 321 GAWIN CT.  
City-St-Zip: TALLAHASSEE, FL 32301

Title: D ( ) Delete  
Name: JOHNSON, NATHANIEL M  
Address: 914 APACHE ST.  
City-St-Zip: TALLAHASSEE, FL 32301

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D ( ) Change (X) Addition  
Name: THURSTON, MARGARET  
Address: 2532 WHISPER WAY  
City-St-Zip: TALLAHASSEE, FL 32308

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: LEWIS S THURSTON

CEO

01/16/2009

Electronic Signature of Signing Officer or Director

Date