2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009909

Entity Name: THE WINTER SPRINGS GRIZZLIES, INC.

FILED Jan 27, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
165 E BAHAMA RD. WINTER SPRINGS, FL 32708				486 SEMINOLE WOODS BLVD GENEVA, FL 32732			
Current Mailing Address:			Nev	New Mailing Address:			
PO BOX 19 WINTER S	96145 SPRINGS, FL 327196145						
FEI Number: 20-0917082 FEI Number Applied For ()		FEI Number Not Applicable () Certificate of Status Desired ()					
Name and	Address of Current Reg	gistered Agent:	Nar	ne and	Address of	New Registered	l Agent:
GEBAUER 486 SEMIN GENEVA,	OLE WOODS BLVD						
	named entity submits this e of Florida.	statement for the p	urpose of cha	inging i	ts registered	office or registere	ed agent, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
OFFICERS	S AND DIRECTORS:		AD	OITION	IS/CHANGES	TO OFFICERS	AND DIRECTORS
Title: Name: Address: City-St-Zip:	CD () Delete GEBAUER, KAREN 486 SEMINOLE WOOD BLVI GENEVA, FL 32732)	Title: Nam Addr City-	e:	() Change ()Additi	on
Title: Name: Address: City-St-Zip:	PD () Delete BONURA, JOSEPH 165 E BAHAMA RD WINTER SPRINGS, FL 3270	98	Title: Nam Addr City-	e:	THOMPSON, I 265 STONER		on
Title: Name: Address: City-St-Zip:	D () Delete LUCE, JONI 1235 WINDING CHASE RD WINTER SPRINGS, FL 3270	08	Title: Nam Addr City-	e:	SCHUSTER, S 4096 E. DANB		on
Title: Name: Address: City-St-Zip:	SD () Delete DAY, ALLISON 687 ENDEAVOR DR WINTER SPRINGS, FL 3270	98	Title: Nam Addr City-	e:	() Change ()Additi	on
Title: Name: Address: City-St-Zip:	D () Delete POTTS, SANDY 341 RIUNITE CIRCLE WINTER SPRINGS, FL 3270	98	Title: Nam Addr City-	e:	MONTEVECHI 209 SHORE R	•	on
Title: Name: Address: City-St-Zip:	TD () Delete BARWICK, TRACY 618 FISHER ROAD WINTER SPRINGS, FL 3270	98	Title: Nam Addr City-	e:	HAMILTON, TE 993 TURKEY I	K) Change () Additi RACIE HOLLOW CIRCLE INGS, FL 32708	on

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: KAREN GEBAUER CD 01/27/2009