

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000600

FILED  
Feb 28, 2008  
Secretary of State

**Entity Name:** FLORIDA EVERBLADES FAN CLUB, INC.

**Current Principal Place of Business:**

11000 EVERBLADES PKWY  
ESTERO, FL 33928

**New Principal Place of Business:**

**Current Mailing Address:**

11000 EVERBLADES PKWY  
ESTERO, FL 33928

**New Mailing Address:**

**FEI Number:** 56-2431572

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BYINGTON, MARTIN D  
728 ARDSON CT  
FT MYERS, FL 33913 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: PD ( ) Delete  
Name: BYINGTON, MARTIN D  
Address: 728 ARDSON CT  
City-St-Zip: FT MYERS, FL 33913

Title: VPD ( ) Delete  
Name: DEVAN, CHARLES  
Address: 10935 GROUND DOVE CIR  
City-St-Zip: ESTERO, FL 33928

Title: TD ( ) Delete  
Name: WILLIS, MELISSA  
Address: 25041 BALLYCASTLE CT #101  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: SD ( ) Delete  
Name: LEANN, KNAPP  
Address: 4665 VARSITY CIR  
City-St-Zip: LEHIGH ACRES, FL 33971

Title: SD ( ) Delete  
Name: HARPER, SANDRA  
Address: 517 WILDWOOD PKWY  
City-St-Zip: CAPE CORAL, FL 33904

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

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: MARTIN D BYINGTON

PD

02/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date