

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005731

FILED
Jan 04, 2006
Secretary of State

Entity Name: L2 SPORTS, INC.

Current Principal Place of Business:

2972 CARLSBAD COURT
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

2972 CARLSBAD COURT
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 20-0794933

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WISE, MELANIE J
7206 BLAIR DR.
ORLANDO, FL 32818 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: PETTIS, VERA B
Address: 2972 CARLSBAD COURT
City-St-Zip: OVIEDO, FL 32765

Title: VICE () Delete
Name: PETTIS, CARTREE D
Address: 2972 CARLSBAD COURT
City-St-Zip: OVIEDO, FL 32765

Title: TREA () Delete
Name: BODAGER, ANITA
Address: 513 WILMINGTON CIRCLE
City-St-Zip: OVIEDO, FL 32765

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:

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: CARTREE PETTIS

VICE

01/04/2006

Electronic Signature of Signing Officer or Director

Date