2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2005 8:00 am
Secretary of State
04-15-2005 90078 028 ****61.25

DOCUMENT # N04000006036

1. Entity Name
WORLD CLASS BOXING CLUB, INC.

Principal Place of Business	Mailing Address
903 S. 21ST STREET FORT PIERCE, FL 34950	P.O. BOX 1633 FORT PIERCE, FL 34954

04122005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 12054 Suite, Apt. #, etc.
City & State	Fort Pierce FL
Zip / Country	34979-2054 / USA

4. FEI Number 38-3704964 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SANTIAGO, RICHARD 333 SW DWIGHT AVE PORT ST LUCIE, FL 34983	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HALSEY, KAREN 1538 N LONGWOOD CIR#2 FT PIERCE, FL 34950	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Halsey, Karen 1912 Zephyr Ave Fort Pierce, FL 34982	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SANTIAGO, DEADINA 333 S.W. DWIGHT AVE. PORT ST LUCIE, FL 34983	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SANCHEZ, GINA 558 SW HAMBURG TERR PORT ST LUCIE, FL 34983	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Brisson, Michelle 1112 Marabella Ave. Fort Pierce, FL 34982	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GALARZ, VICKIE 907 E WEATHERBEE RD #G FORT PIERCE, FL 34982	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Flores, Celina 1000 West First Street Fort Pierce, FL 34982	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S.A. Waters, Charles 2935 Admiral St. Fort Pierce, FL 34982	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen A. Halsey President 4-13-05 772-979-5832
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #