

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011228

FILED  
Apr 18, 2008  
Secretary of State

Entity Name: SPORTAID INTERNATIONAL, INC.

**Current Principal Place of Business:**

100 LAKE HART DR.-3500  
ORLANDO, FL 328320100

**New Principal Place of Business:**

**Current Mailing Address:**

100 LAKE HART DR.-3500  
ATTN: GENERAL COUNSEL'S OFFICE  
ORLANDO, FL 328320100

**New Mailing Address:**

FEI Number: 20-1945731      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BRAWN, KAREN  
100 LAKE HART DR.-3500  
ORLANDO, FL 328320100 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: D ( ) Delete  
Name: DOUGLASS, STEPHEN B  
Address: 100 LAKE HART DR.-2100  
City-St-Zip: ORLANDO, FL 328320100

Title: D ( ) Delete  
Name: ROGERS, JOHN  
Address: 100 LAKE HART DR.-2100  
City-St-Zip: ORLANDO, FL 328320100

Title: D ( ) Delete  
Name: TRAVASOS, SCOTT A  
Address: 1650 N COAST HIGHWAY 101, SUITE B  
City-St-Zip: ENCINITAS, CA 92024

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: SELLERS, STEVEN C  
Address: 100 LAKE HART DRIVE - 2100  
City-St-Zip: ORLANDO, FL 32832

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: STEVEN C. SELLERS

D

04/18/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date