

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001879

FILED
Mar 06, 2006
Secretary of State

Entity Name: FUNADDICTS SPORTS CHARITY INC.

Current Principal Place of Business:

4931 NW 110TH WAY
CORAL SPRINGS, FL 33076

New Principal Place of Business:

Current Mailing Address:

4931 NW 110TH WAY
CORAL SPRINGS, FL 33076

New Mailing Address:

FEI Number: 31-0306160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, ROBERT
4931 NW 110TH WAY
CORAL SPRINGS, FL 33076 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: COLE, ROBERT
Address: 4931 NW 110TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: COLE, MERIDEE
Address: 4931 NW 110TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D () Delete
Name: COLE, CONNER
Address: 4931 NW 110TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

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: ROBERT COLE

DIR

03/06/2006

Electronic Signature of Signing Officer or Director

Date