2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000003443

1. Entity Name CITY PLAYERS, INC.



FILED
Mar 14, 2006 8:00 am
Secretary of State
02 1 4 200 6 00020 002 *****61 25

03-14-2006 90028 003 ****61.25

			\					
201 LEEWA	ace of Business ARD ISLAND ER, FL 33767	Mailing Address 201 LEEWARD ISLAND CLEARWATER, FL 3376	67					
2 Principal	Dinas of Duniasas	1 2 Maii - Adda-						
z. mncipai	Place of Business	3. Mailing Address				BUM BAM BAM BAM BA	NI Dales auu ka dh dales	
Suite, Ap	it. #, etc.	Suite, Apt. #, etc.			02212006 C	hg-NP C	CR2E037 (11/05)	
City & State		City & State		··· · · · · · · · · · · · · · · · · ·	4. FEI Number	7325		Applied For lot Applicable
Zip	Country	Zip	Country		5. Certificate of S		\$8.75 Ac	ditional
	6. Name and Address of Current	Registered Agent			7. Name and Add	tress of New Regis	<u>`</u>	
DI ICCI D	ATRICE A		Na	ame				
2719 1ST			St	reet Address (P.O. Box Number is	Not Acceptable)		
ST PETE	RSBURG, FL 33743		ļ	 				
			Cit	h.			17:-0-	4
	·····			•			FL Zip Co	
8. The above the obligation	e named entity submits this statement fo ations of registered agent.	or the purpose of changing its r	registered of	lice or register	ed agent, or both, in	the State of Florida	a. I am familiar with	, and accept

SIGNATURE	Signature, typed or printed hame of registered agent	and title if applicable. (NOTE:	Registered Agen	t signature required	when reinstating)		DATE	
							· · · · · · · · · · · · · · · · · · ·	
	Filing Pée is \$61.25 Due by May 1, 2006	9. Election Camp Trust Fund Co		ing 🔲	\$5.00 May Be Added to Fees		check payable to Department of S	
10.	OFFICERS AND DI	RECTORS	11.		ADDITIONS/CHANGI			
TITLE	D	Oelete	TITLE	V			∑ Change	Addition
NAME	DANIELS, MYRON		NAME	Dan	riels, Myron Thomas La	n-T		
STREET ADDRESS CITY-ST-ZIP	30 THOMAS LN OLDSMAR, FL 34677		STREET ADD	RESS 30 7	Thomas' La	ne au nh		
TITLE	D	☐ Delete	TITLE	Dia	smar, FL	37611	(7)(0)	
NAME	BUDIN, RICHARD	a veidio	NAME	Bud	in, Richard Lee Ward I	(- T	□ Change	Addition
STREET ADDRESS CITY-ST-ZIP	201 LEEWARD ISLAND		STREET ADD	RESS 2011	eeward I	Island		
TITLE	CLEARWATER, FL 33767	<u> </u>	CITY-ST-ZIP	' IClea	rwater. Fl	. 33767		
NAME	GONTAREK, CHRISTINE	Delete	TITLE NAME	5/7	tarek, Ch 8 Longbrook rwater, 1	nisting.	Change	■ Addition
STREET ADDRESS	3038 LONGBROOKE WAY		STREET ADDI	ESS 303	8 Longhood	be Ilau	,	
CITY-ST-ZIP	CLEARWATER, FL 33770		CITY-ST-ZIP	Clea	rwater 1	FL 33760	0	
TITLE NAME		☐ Delete	MLE				☐ Change	Addition
STREET ADDRESS			NAME STREET ADDR	Gra	y, Callie 6 Bay Blud.	-, . #2		
CITY-ST-ZIP			CITY-ST-ZIP	Indi	an Rocks, F	:/ 3378:	5	
TITLE		☐ Delete	TITLE				Change	Addition
NAME STREET ADDRESS			NAME	Pucc	i, Betty	Jane-T		
CITY-ST-ZIP			STREET ADOR		6 Sommer		1/	
TITLE		☐ Delete	MILE	į.	arwater, F		<u>7</u> ☐ Change	Addition
NAME			NAME	Puc	ci, Patric 1 37+4 Av	e-7	T. rusning	NA SIGNATUR
STREET ADDRESS CITY-ST-ZIP			STREET ADDR	ESS 807	/ 3ንተላ Av	e, N.		
on i - ai - Br			CITY-ST-ZIP	151,7	Petersburg	1. FL 337	110	

^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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. PAGELIOFZ CONTINUED NEXT PAGE

ATTACHMENT

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

1. Entity Nan	MEN # N05000003 AYERS, INC.	3443							
201 LEEWAR	ce of Business RD ISLAND R, FL 33767	Mailing Address 201 LEEWARD ISLAND CLEARWATER, FL 33767	•		40	030)8	88	
2. Principal F	Place of Business	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		i	02212006	Chg-NP	CR2E0	37 (11/05)	
City & State		City & State			4. FEI Number 14-19:	27325			pplied For lot Applicable
Zip	Country	Zip	Country		5. Certificate of S	Status Desired		\$8.75 Ad Fee Require	
	6. Name and Address of Current	Registered Agent	Name		7Name and Ad	dress of New R	egistered	Agent	
PUCCI, PA				ddrono /S	P.O. Box Number is	. Net A contable			
2719 1ST ST PETER	RSBURG, FL 33743		Street A	duless (F	O. Box Number is	Not Acceptable			
			City				FL	Zip Cod	
	named entity submits this statement fo tions of registered agent.	r the purpose of changing its reg	istered office or	r registere	ed agent, or both, in	n the State of Flo	orida. I am	familiar with,	, and accept
	, ,								
SIGNATURE.									
SIGIVATORE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	gistered Agent signati	ure required t	when reinstating)		DATE		
SIGNATORE								k pavable t	
SIGNATURE	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2006	9. Election Campa Trust Fund Cont	ign Financing		\$5.00 May Be Added to Fees	Flori	ake chec ida Depar	k payable t	itate
10.	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIR	S. Election Campa Trust Fund Cont RECTORS	ign Financing tribution.		\$5.00 May Be	Flori	ake chec ida Depar	RECTORS IN	N 10
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIE DANIELS, MYRON 30 THOMAS LN	9. Election Campa Trust Fund Cont	ign Financing tribution. 11. TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Trnent of S RECTORS IN Change	N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIR DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677	9. Election Campa Trust Fund Cont	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP		\$5.00 May Be Added to Fees	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Trinent of S RECTORS IN Change	N 10 Addition
10. TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD	S. Election Campa Trust Fund Cont RECTORS	ign Financing tribution. 11. TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Trnent of S RECTORS IN Change	N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 53767	9. Election Campa Trust Fund Cont	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Trinent of S RECTORS IN Change	N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D	9. Election Campa Trust Fund Cont	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE THE TAME THE TAME THE TAME THE TAME THE TAME THE TAME		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Trinent of S RECTORS IN Change	N 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE 3038 LONGBROOKE WAY	9. Election Campa Trust Fund Cont Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Triment of S RECTORS IN Change 3378. Change	N 10 Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE THE NAME	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE	9. Election Campa Trust Fund Cont Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Triment of S RECTORS IN Change 3378. Change	N 10 Addition Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE 3038 LONGBROOKE WAY	9. Election Campa Trust Fund Cont BECTORS Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Triment of S RECTORS IN Change Change Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE 3038 LONGBROOKE WAY	9. Election Campa Trust Fund Cont BECTORS Delete Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Thent of S RECTORS IN Change Change Change	N 10 Addition Addition
TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE 3038 LONGBROOKE WAY	9. Election Campa Trust Fund Cont BECTORS Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Triment of S RECTORS IN Change Change Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE 3038 LONGBROOKE WAY	9. Election Campa Trust Fund Cont BECTORS Delete Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Thent of S RECTORS IN Change Change Change	N 10 Addition Addition
TIO. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE 3038 LONGBROOKE WAY	9. Election Campa Trust Fund Cont BECTORS Delete Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Thent of S RECTORS IN Change Change Change	N 10 Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Filing Fee is \$61.25 Due by May 1, 2006 OFFICERS AND DIF DANIELS, MYRON 30 THOMAS LN OLDSMAR, EL 34677 D BUDIN, RICHARD 201 LEEWARD ISLAND CLEARWATER, FL 33767 D GONTAREK, CHRISTINE 3038 LONGBROOKE WAY	9. Election Campa Trust Fund Cont RECTORS Delete Delete Delete	ign Financing tribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP		\$5.00 May Be Added to Fees DDITIONS/CHANG	Flori GES TO OFFICE	ake chec ida Depar RS AND DI	Thent of S RECTORS IN Change Change Change	Addition Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Descriptions

Descriptio