

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008746

FILED
Apr 05, 2006
Secretary of State

Entity Name: SPARTAN TOUCHDOWN CLUB, INC.

Current Principal Place of Business:

LAW OFFICES OF C.Y. HOWARD, P.A.
15321 S DIXIE HWY - STE 302
MIAMI, FL 33157

New Principal Place of Business:

12843 SW 210 TERR.
MIAMI, FL 33177

Current Mailing Address:

LAW OFFICES OF C.Y. HOWARD, P.A.
15321 S DIXIE HWY - STE 302
MIAMI, FL 33157

New Mailing Address:

SPARTAN TOUCHDOWN CLUB, INC., C/O C. COHEN
P.O. BOX 1585
MIAMI, FL 33197

FEI Number: 59-3814791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONARD, VALERIE
219 SW 124 PLACE
MIAMI, FL 33170 US

Name and Address of New Registered Agent:

COHEN, CELINE
20704 SW 103 PLACE
MIAMI, FL 33189 US

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: CELINE COHEN

04/05/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: RUFFIN, TABATHA
Address: 28185 SW 143RD CT
City-St-Zip: MIAMI, FL 33032

Title: T () Delete
Name: LEONARD, VALARIE
Address: 21958 SW 124 PL
City-St-Zip: MIAMI, FL 33170

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: COHEN, CELINE
Address: 20704 SW 103 PLACE
City-St-Zip: MIAMI, FL 33189

Title: P () Change (X) Addition
Name: CLAVIJO, AINEK
Address: 12843 SW 210 TERR
City-St-Zip: MIAMI, FL 33157

Title: VP () Change (X) Addition
Name: DORSEY, JOANN
Address: 15423 SW 102 PLACE
City-St-Zip: MIAMI, FL 33157

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: CELINE COHEN

T

04/05/2006

Electronic Signature of Signing Officer or Director

Date