2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009127

Entity Name: FLORIDA CRICKET ASSOCIATION, INC.

FILED Feb 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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8130 BAYMEADOWS CIRCLE, W 7670 CROSSTREE LANE

JACKSONVILLE, FL 32256 US 109

JACKSONVILLE, FL 32256

New Mailing Address: Current Mailing Address:

7670 CROSSTREE LANE 8130 BAYMEADOWS CRICLE, W

JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32256

FEI Number: 20-3570534 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CHALLAGULLA, SATISH VENKATRAMA, KRISHNA 737 MACKENZIÉ CIRCLE 7670 CROSSTŘEE LANE

ST AUGUSTINE, FL 32092 US JACKSONVILLE, FL 32256 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: KRISHNA VENKATRAMA 02/27/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

PANDIT, HARISH SRIKAKOLAPU, VAMSEE Name: Name:

9066 HAMPTON LANDING DRIVE EAST Address: 7882 BLACKSTONE RIVER DR EAST Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US

Title: () Delete Title: () Change () Addition VENKATRAMA, KRISHNAKUMAR Name: Name:

Address: 7670 CROSSTREE LANE Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip:

Title: DIR () Delete Title: (X) Change () Addition ARORA, PRADEEP Name: NARAYANAPPA, MURALIDHARA Name: 8130 BAYMEADOWS CRICLE, W #109 C/O FCA, 7670 CROSSTREE LANE Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US

() Delete Title: DIR Title: () Change () Addition

CHALLAGULLA, SATISH Name: Name: 737 MACKENZIE CIRCLE Address: Address: City-St-Zip: ST AUGUSTINE, FL 32092 US City-St-Zip:

Title: DIR () Delete Title: DIR (X) Change () Addition

ARUNODAYAM, KASI Name: Name: GABITTA, MADHU

9536 PRINCETON SQUARE BLVD S, #2109 C/O FCA, 7670 CROSSTREE LANE Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: JACKSONVILLE, FL 32256 US

Title: () Delete Title: () Change (X) Addition

SANKARAN, RAJESH Name: Name: Address: Address: C/O FCA, 7670 CROSSTREE LANE

City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip:

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: KRISHNA VENKATRAMA DIR 02/27/2009

Electronic Signature of Signing Officer or Director

Date