2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010479

FILED Jan 20, 2007 Secretary of State

Entity Name: BUFFALO BILLS BACKERS OF NAPLES, FL., INC.

Current Principal Place of Business: New Principal Place of Business:

6017 PINE RIDGE STE 143 NAPLES, FL 34119

Current Mailing Address: New Mailing Address:

6017 PINE RIDGE RD, STE 143 NAPLES, FL 34119

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

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

TERRY, MIKE 6017 PINE RIDGE RD, STE 143 NAPLES, FL 34119 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 V
 () Delete

 Name:
 WHEELER, CHRISTINE

 Address:
 6017 PINE RIDGE RD, STE 143

City-St-Zip: NAPLES, FL 34119

Title: S () Delete

Name: TERRY, SHARON Address: 6017 PINE RIDGE RD. STE 143

City-St-Zip: NAPLES, FL 34119

Title: P-T () Delete

Name: TERRY, MIKE

Address: 6017 PINE RIDGE RD, STE 143

City-St-Zip: NAPLES, FL 34119

Title: D () Delete Name: DOLL, RICHARD

Address: 6017 PINE RIDGE RD, STE 143

City-St-Zip: NAPLES, FL 34119

Title: D () Delete Name: PAWENSKA, CHET

Name: PAWENSKA, CHET
Address: 6017 PINE RIDGE RD, STE 143

City-St-Zip: NAPLES, FL 34119

ADDITIONO IANGEO TO OTT TOLING AND DIRECTOR

Title: V (X) Change () Addition

Name: MACIEJEWSKI, JAMES J Address: 6361 PELICAN BAY BLVD. #304

City-St-Zip: NAPLES, FL 34108

Title: S (X) Change () Addition

Name: CICERONE, DIANE

Address: 6017 PINE RIDGE RD, STE 143

City-St-Zip: NAPLES, FL 34119

Title: T (X) Change () Addition

Name: TERRY, MIKE
Address: 6017 PINE RIDGE RD, STE 143

Address. 0017 Fine RIDGE RD, STE 143

City-St-Zip: NAPLES, FL 34119

Title: P (X) Change () Addition

Name: DOLL, RICHARD

Address: 6017 PINE RIDGE RD, STE 143

City-St-Zip: NAPLES, FL 34119

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: MIKE TERRY T 01/20/2007