## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000012159

12124 DARWIN DR

ORLANDO, FL 32826

Address:

City-St-Zip:

Entity Name: DEM SPORTS CORPORATION

FILED Sep 04, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12124 DARWIN DR ORLANDO, FL 32826 **Current Mailing Address: New Mailing Address:** P.O. BOX 780362 ORLANDO, FL 32878 FEI Number: 57-1226835 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JENKINS, MICHAEL PARKER, WAYNE 12124 DARWIN DR 12124 DARWIN DR US ORLANDO, FL 32826 US ORLANDO, FL 32826 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: WAYNE PARKER 09/04/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Delete () Change () Addition JENKINS, MICHAEL Name: Name: 12124 DARWIN DR Address: Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: Title: () Delete Title: () Change () Addition PARKER, WAYNE Name: Name: Address: 12124 DARWIN DR Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: Title: () Delete Title: () Change () Addition LOPEZ, EDWIN Name: Name: 12124 DARWIN DR Address: Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SHORB, MICHAEL Name: 12124 DARWIN DR Address: Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: Title: Title: () Delete () Change () Addition SHANNON, DAVE Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: WAYNE PARKER D 09/04/2007