

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003280

FILED  
Jul 13, 2007  
Secretary of State

Entity Name: SOUTH FLORIDA THUNDER BASEBALL, INC.

**Current Principal Place of Business:**

5320 NW 118TH AVENUE  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

**Current Mailing Address:**

5320 NW 118TH AVENUE  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

FEI Number: 57-1233049      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:**

BROWNSTEIN, SHARI  
9591 NW 48TH MANOR  
CORAL SPRINGS, FL 33076      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:**

Title: P      ( ) Delete  
Name: KOEBEL, THOMAS  
Address: 5320 NW 118TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: VP      ( ) Delete  
Name: MESSINA, JOHN  
Address: 8660 NW 54TH STREET  
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D      ( ) Delete  
Name: BROWNSTEIN, BRIAN  
Address: 9591 NW 48TH MANOR  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D      ( ) Delete  
Name: BUDDEN, RUSSELL  
Address: 4964 NW 58TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: D      ( ) Delete  
Name: KUMAR, KIM  
Address: 7681 NW 88TH WAY  
City-St-Zip: TAMARAC, FL 33321

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: D      (X) Change ( ) Addition  
Name: VASQUEZ, JUAN  
Address: 5320 NW 118TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
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: THOMAS F KOEBEL

P

07/13/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date