2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003827

Entity Name: FSU ROLLER HOCKEY INC.

FILED Feb 05, 2009 Secretary of State

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

2700 W PENSACOLA ST 900 RIGGINGS ROAD

APT 1814 APT 138

TALLAHASSEE, FL 32304 US TALLAHASSEE, FL 32308 US

Current Mailing Address: New Mailing Address:

2700 W PENSACOLA ST 900 RIGGINGS ROAD APT 1814 **APT 138**

TALLAHASSEE, FL 32304 US TALLAHASSEE, FL 32308 US

FEI Number: 20-5418466 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:

C & M BENTON, LLC 1554 BOREN DRIVE SUITE 200 OCOEE, FL 34761 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

PRES () Delete

KAHN, JEFFREY Name:

2700 W PENSACOLA STREET APT 1814 Address:

City-St-Zip: TALLAHASSEE, FL 32304 US

Title: **VPRE** () Delete

HOROWITZ, MAX Name:

Address: 805 CYPRESS BLVD APT 510

City-St-Zip: POMPANO BEACH, FL 33069 US

Title: TRES () Delete

SIMON, COREY Name:

Address: 3506 ROYAL PALM AVE City-St-Zip: MIAMI, FL 33133 US

Title: SEC () Delete Name: STROUD, DUSTIN

2309 OLD BAINBRIDGE ROAD 802-A Address:

City-St-Zip: TALLAHASSEE, FL 32303 US ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Name: KAHN JEFFREY

Address: 900 RIGGINGS ROAD APT 138

City-St-Zip: TALLAHASSEE, FL 32308 US

(X) Change () Addition Title:

Name: HOROWITZ, MAX

Address: 2241 WEST PENSACOLA STREET APT 52

City-St-Zip: TALLAHASSEE, FL 32304 US

Title: **TRES** (X) Change () Addition

SIMON, COREY Name:

Address: 217 WHITE DRIVE APT A-4 City-St-Zip: TALLAHASSEE, FL 32304 US

Title: SEC (X) Change () Addition

Name: LIPMAN, JONATHAN

400 HAYDEN ROAD APT 1412 Address: City-St-Zip: TALLAHASSEE, FL 32304 US

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: MARCA L BENTON EA RΑ 02/05/2009