## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000006784

FILED Jul 09, 2007 Secretary of State

Entity Name: CENTRAL FLORIDA GOLDEN KNIGHTS ICE HOCKEY TEAM, INC.

**Current Principal Place of Business: New Principal Place of Business:** 12500 HYANIS CT. 8701 MATLAND SUMMIT BLVD ORLANDO, FL 32828 ORLANDO, FL 32810 **Current Mailing Address: New Mailing Address:** P.O. BOX 163548 12500 HYANIS CT ORLANDO, FL 32828 ORLANDO, FL 32816 FEI Number: 06-1790976 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: PITTMAN, PAUL 151 NW 207TH AVENUE PEMBROKE PINES, FL 33029 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: (X) Change ( ) Addition () Delete ROEFARO, NICK PITTMAN, RUSSELL Name: Name: Address: 3249 ALAFAYA CLUB DR., APT 202 Address: 151 N.W. 207 AVE City-St-Zip: ORLANDO, FL 32826 City-St-Zip: PEMBROKE PINES, FL 33029 Title: () Delete Title: (X) Change ( ) Addition Name: KHOURI, JOHN Name: MALAK, JASON Address: 1847 LOFTWAY CIRCLE, APT 2210 Address: 2063 CORNEAU MEADOWS LAKES City-St-Zip: ORLANDO, FL 32816 City-St-Zip: ORLANDO, FL 32820 Title: () Delete Title: (X) Change ( ) Addition LITRIDES, DOUG Name: MOUSER, LOUIS Name: Address: 4400 GREEK COURT Address: 1002 GREYWOOD AVE City-St-Zip: ORLANDO, FL 32816 City-St-Zip: TARPON SPRINGS, FL 34689 Title: () Delete Title: ( ) Change (X) Addition Name: Name: HEYENS, MATT 1319 FORESTRIDGE BLVD Address: Address: City-St-Zip: City-St-Zip: OLDSMAR, FL 34677

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: RUSSELL PITTMAN P 07/09/2007