

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008744

FILED
Mar 30, 2009
Secretary of State

Entity Name: SOUTH FLORIDA SEAHAWKS, INC

Current Principal Place of Business:

13720 HAMLIN BLVD
WEST PALM BEACH, FL 33410 US

New Principal Place of Business:

Current Mailing Address:

13720 HAMLIN BLVD
WEST PALM BEACH, FL 33410 US

New Mailing Address:

FEI Number: 20-5396799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VACCARO, JOHN R
1325 S CONGRESS AVE
SUITE 201
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

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: LOVE, CHRISTINA
Address: 13720 HAMLIN BLVD
City-St-Zip: WEST PALM BEACH, FL 33410 US

Title: VP () Delete
Name: FROST, CHRISTINE
Address: 13720 HAMLIN BLVD
City-St-Zip: WEST PALM BEACH, FL 33410 US

Title: SEC () Delete
Name: BURROUGHS, MONICA
Address: 13720 HAMLIN BLVD
City-St-Zip: WEST PALM BEACH, FL 33410 US

Title: TRES () Delete
Name: NYS, MICHAEL
Address: 13720 HAMLIN BLVD
City-St-Zip: WEST PALM BEACH, FL 33410 US

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: () 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: CHRISTINA LOVE

PRES

03/30/2009

Electronic Signature of Signing Officer or Director

Date