

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004008

FILED
Jan 21, 2008
Secretary of State

Entity Name: CENTRAL FLORIDA CRICKET ASSOCIATION, INC.

Current Principal Place of Business:

3910 WOODGALE COVE
WINTER PARK, FL 32792

New Principal Place of Business:

6121 RALEIGH STREET
APT. 702
ORLANDO, FL 32835 US

Current Mailing Address:

3910 WOODGALE COVE
WINTER PARK, FL 32792

New Mailing Address:

P. O. BOX 617438
ORLANDO, FL 32861 US

FEI Number: 26-0245857

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THORINGTON, TREVOR E CPA
1086 CONDOR PLACE
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

DANIEL, LOUIS P
7318 WINDING LANE CIRCLE
OVIEDO, FL 32765 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: LOUIS DANIEL

01/21/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DANIEL, LOUIS
Address: 7318 WINDING LANE CIRCLE
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: MOTIWALA, KHALID
Address: 7961 BRIDGESTONE DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: BENT, DELROY
Address: 15706 MUIRFIELD DRIVE
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: ALLEYNE, ROMAN L
Address: 3910 WOODGLADE COVE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DANIEL, LOUIS P
Address: 7318 WINDING LANE CIRCLE
City-St-Zip: OVIEDO, FL 32765 US

Title: D (X) Change () Addition
Name: GREY, OWEN A V
Address: 3109 BELLE SHADOW LANE
City-St-Zip: TAMPA, FL 33634 US

Title: D (X) Change () Addition
Name: CAMPBELL, ORDINE L S
Address: 6121 RALEIGH STREET
City-St-Zip: ORLANDO, FL 32835 US

Title: D (X) Change () Addition
Name: ALLEYNE, ROMAN L T
Address: 3910 WOODGLADE COVE
City-St-Zip: WINTER PARK, FL 32792 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: ROMAN L. ALLEYNE

T

01/21/2008

Electronic Signature of Signing Officer or Director

Date