## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000006335

Entity Name: ALL DAY ATHLETICS, INC.

FILED Aug 22, 2008 Secretary of State

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

% FREDDIE COLE 400 CAPITAL CIRCLE SE - STE 18239 TALLAHASSEE, FL 323013938

**New Mailing Address: Current Mailing Address:** 

% FREDDIE COLE 400 CAPITAL CIRCLE SE - STE 18239 TALLAHASSEE, FL 323013938

FEI Number: 64-0950822 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:

COLE, FREDDIE COLE, FREDDIE 2074 MIDYETTE RD 1222 HIGH RD.

TALLAHASSEE, FL 32304 US #622

TALLAHASSEE, FL 32301 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: 08/22/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete

COLE. FREDDIE Name: Name: Address: 400 CAPITAL CIRCLE SE - STE 18239 Address: City-St-Zip: TALLAHASSEE, FL 323013938 City-St-Zip:

Title: () Delete Title: () Change () Addition

MACK, RODERICK Name: Name: Address: 400 CAPITAL CIRCLE SE - STE 18239 Address: City-St-Zip: TALLAHASSEE, FL 323013938 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition GRANGER, EUGENE Name: JONES, MARION DIRECTO Name:

400 CAPITAL CIRCLE SE - STE 18239 400 CAPITAL CIRCLE SE - STE 18239 Address: Address: City-St-Zip: TALLAHASSEE, FL 323013938 City-St-Zip: TALLAHASSEE, FL 323013938

Title: () Delete Title: ( ) Change (X) Addition Name: Name: TURNER, NICK DIRECTO

400 CAPITAL CIRCLE SE SUITE # 18239 Address: Address:

City-St-Zip: City-St-Zip: TALLAHASSEE, FL 323043938

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: FREDDIE COLE **PRES** 08/22/2008