

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004261

FILED  
Jun 22, 2009  
Secretary of State

Entity Name: CONCOURSE OF CHAMPIONS, INC.

## Current Principal Place of Business:

28801 SW 157 AVENUE  
HOMESTEAD, FL 33033

## New Principal Place of Business:

## Current Mailing Address:

28801 SW 157 AVENUE  
HOMESTEAD, FL 33033

## New Mailing Address:

FEI Number: 26-2601405      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:

CHOOS, S. SCOTT ESQ  
44 NE 16TH STREET  
HOMESTEAD, FL 33030      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:

Title: DS      ( ) Delete  
Name: ACCURSIO, J.J.  
Address: 18792 OSPREY WAY  
City-St-Zip: JUPITER, FL 33458

Title: D      ( ) Delete  
Name: MOEHLING, ROBERT  
Address: 19200 SW 344 STREET  
City-St-Zip: HOMESTEAD, FL 33034

Title: D      ( ) Delete  
Name: TIMMONS, RACEY  
Address: 18524 SW 293 TERRACE  
City-St-Zip: HOMESTEAD, FL 33030

Title: D      ( ) Delete  
Name: FURNARI, JOEL  
Address: 710 SE 29 DRIVE  
City-St-Zip: HOMESTEAD, FL 33033

Title: D      ( ) Delete  
Name: NELSON, DAVID  
Address: 25401 SW 147 AVENUE  
City-St-Zip: HOMESTEAD, FL 330325322

Title: DT      ( ) Delete  
Name: DRINKHAHN, DON E  
Address: 28401 SW 167 AVENUE  
City-St-Zip: HOMESTEAD, FL 33030

## 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:

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: WILLIE L. CARPENTER

DIR

06/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date