

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007324

FILED  
Feb 19, 2009  
Secretary of State

Entity Name: D-R TWIN SPORTS INC.

## Current Principal Place of Business:

1225 TAMIAMI TRAIL  
UNIT#A9  
PORT CHARLOTTE, FL 33953 US

## Current Mailing Address:

390 FAIRHAVEN STREET  
PORT CHARLOTTE, FL 33952 US

## New Principal Place of Business:

525 TAMIAMI TRAIL  
UNIT#1  
PORT CHARLOTTE, FL 33953 US

## New Mailing Address:

FEI Number: 26-3095922      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALVARADO, DANIEL  
390 FAIRHAVEN STREET  
PORT CHARLOTTE, FL 33952 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: ALVARADO, DANIEL  
Address: 390 FAIRHAVEN STREET  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: VP (X) Delete  
Name: MARIN, RODRIGO  
Address: 20326 LADNER AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: S (X) Delete  
Name: ALVARADO, ANDREA  
Address: 390 FAIRHAVEN STREET  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: S (X) Delete  
Name: MARIN, BETTY  
Address: 20326 LADNER AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33954 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: DANIEL ALVARADO

P

02/19/2009

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

\_\_\_\_\_  
Date