2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008009

FILED May 18, 2009 Secretary of State

Entity Nar	me: FLORIDA GHOST TEAM INC.			
Current Principal Place of Business:		New Princ	ipal Place of Business:	
	2ND ST, APT 3 D BEACH, FL 33069			
Current Mailing Address:		New Maili	New Mailing Address:	
	2ND ST, APT 3 D BEACH, FL 33069			
In accordan	: 27-0188934 FEI Number Applied For() FEI ce with s. 607.193(2)(b), F.S., the corporation did not rece I Address of Current Registered Agent:	-		
POMPANO The above	HAUN 2ND ST, APT 3 D BEACH, FL 33069 US named entity submits this statement for the purpose of Florida.	se of changing i	ts registered office or registered agent, or both,	
SIGNATUR				
Electronic Signature of Registered Agent			Date	
OFFICERS	S AND DIRECTORS:	ADDITION	IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete JONES, SHAUN 1541 NW 2ND ST, APT 3 POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S () Delete PORTER, SHAWN 1541 NW 2ND ST, APT 3 POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	T (X) Change () Addition AURIN, CARL 10587 SOUTH 228TH LANE BOCA RATON, FL 33428	
Title: Name: Address: City-St-Zip:	T () Delete AURIN, CHUCK 1541 NW 2ND ST, APT 3 POMPANO BEACH, FL 33069	Title: Name: Address: City-St-Zip:	D (X) Change () Addition AURIN, CARL 10587 SOUTH 228TH LANE BOCA RATON, FL 33428	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	S () Change (X) Addition JONES, SHAUN 1541 NW 2ND STREET APT 3 POMPANO BEACH, FL 33069	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	VP () Change (X) Addition AURIN, CARL 10587 SOUTH 228TH LANE BOCA RATON, FL 33428	

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: SHAUN JONES PD 05/18/2009