

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008902

FILED
Jun 26, 2009
Secretary of State

Entity Name: SHAM-ROXZ VOLLEYBALL, INC.

Current Principal Place of Business:

313 SE KITCHING CIRCLE
STUART, FL 34994

New Principal Place of Business:

2186 SE TRILLO STREET
PORT SAINT LUCIE, FL 34952

Current Mailing Address:

PO BOX 2699
STUART, FL 34995

New Mailing Address:

FEI Number: 26-3279197 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:

PITTMAN, LARRY W
3915 NW CINNAMON CIRCLE
JENSEN BEACH, FL 34957 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: D () Delete
Name: KEENAN, JOSEPH
Address: PO BOX 2699
City-St-Zip: STUART, FL 34995

Title: D () Delete
Name: BRADLEY, ARDEN
Address: PO BOX 2699
City-St-Zip: STUART, FL 34995

Title: T () Delete
Name: PITTMAN, LARRY W
Address: PO BOX 2699
City-St-Zip: STUART, FL 34995

Title: D () Delete
Name: COLLINS, DANIELLE
Address: PO BOX 2699
City-St-Zip: STUART, FL 34995

Title: D () Delete
Name: NEEDHAM, PAUL
Address: PO BOX 2699
City-St-Zip: STUART, FL 34995

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:

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: LARRY W. PITTMAN

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06/26/2009

Electronic Signature of Signing Officer or Director

Date