

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 19, 2009**  
**Secretary of State**

DOCUMENT# N08000010727

**Entity Name:** MUSTANG HOOPSTERS INC.**Current Principal Place of Business:**1928 TARRAGON LANE  
NEW PORT RICHEY, FL 34655**New Principal Place of Business:****Current Mailing Address:**1928 TARRAGON LANE  
NEW PORT RICHEY, FL 34655**New Mailing Address:****FEI Number:** 26-3767016**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**PALITTI, SUZANNE M  
3152 LITTLE ROAD  
323  
TRINITY, FL 34655 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:** O'BRIEN, DELLENE  
**Address:** 2525 ATWELL COURT  
**City-St-Zip:** NEW PORT RICHEY, FL 34655**Title:** VP ( ) Delete  
**Name:** GILBERT, RICK  
**Address:** 7739 ARELLI DRIVE  
**City-St-Zip:** NEW PORT RICHEY, FL 34655**Title:** TREA ( ) Delete  
**Name:** CORBITT, WAYNE  
**Address:** 9717 PATRICIAN DR  
**City-St-Zip:** NEW PORT RICHEY, FL 34655**Title:** SEC ( ) Delete  
**Name:** KOSMALSKI, ALICE  
**Address:** 1928 TARRAGON LANE  
**City-St-Zip:** NEW PORT RICHEY, FL 34655**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: WAYNE CORBITT

TREA

08/19/2009

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