

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000321

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** FLORIDA BOXING HALL OF FAME, INC.

**Current Principal Place of Business:**

7501 BROOKHAVEN CT.  
TAMPA, FL 33634 US

**New Principal Place of Business:**

**Current Mailing Address:**

7501 BROOKHAVEN CT.  
TAMPA, FL 33634 US

**New Mailing Address:**

PO BOX 262636  
TAMPA, FL 33685 US

**FEI Number:** 94-3462060

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FLANSBURG, WALTER A  
7501 BROOKHAVEN CT.  
TAMPA, FL 33634 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  
Name: FLANSBURG, WALTER A  
Address: 7501 BROOKHAVEN CT.  
City-St-Zip: TAMPA, FL 33634 US

Title: VP  
Name: COHEN, SAMUEL  
Address: 7013 ANTINORI LANE  
City-St-Zip: BOYNTON BEACH, FL 33437 US

Title: VP  
Name: CANTON, STEVEN  
Address: 3833 MAXINE ST  
City-St-Zip: FORT MYERS, FL 33901 US

Title: S/T  
Name: FLANSBURG, KATHY A  
Address: 7501 BROOKHAVEN CT.  
City-St-Zip: TAMPA, FL 33634 US

I hereby 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 all other like empowered.

**SIGNATURE:** KATHY A. FLANSBURG

S/T

01/06/2011

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

\_\_\_\_\_  
Date