

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000009068

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** COCOA BEACH WRESTLING, INC.

**Current Principal Place of Business:**

1500 MINUTEMEN CAUSEWAY  
COCOA BEACH, FL 32931

**New Principal Place of Business:**

**Current Mailing Address:**

50 DANUBE RIVER DRIVE  
COCOA BEACH, FL 32931

**New Mailing Address:**

**FEI Number:** 27-0945868

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WATSON, KATHLEEN  
50 DANUBE RIVER DRIVE  
COCOA BEACH, FL 32931 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:** WATSON, KATHLEEN  
**Address:** 50 DANUBE RIVER DRIVE  
**City-St-Zip:** COCOA BEACH, FL 32931

**Title:** VP  
**Name:** HADDEN, NIKKI  
**Address:** 102 BOCA CIEGA DRIVE  
**City-St-Zip:** COCOA BEACH, FL 32931

**Title:** S  
**Name:** EDIE, DANIELS  
**Address:** 1500 MINUTEMEN CAUSEWAY  
**City-St-Zip:** COCOA BEACH, FL 32931

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:** KATHLEEN WATSON

P

04/12/2011

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

\_\_\_\_\_  
Date