

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33406

FILED
Mar 05, 2009
Secretary of State

Entity Name: BOCA HOOPS, INC.

Current Principal Place of Business:

1050 NW 15TH STREET
SUITE 212A
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

1050 NW 15TH STREET
SUITE 212A
BOCA RATON, FL 33486 US

New Mailing Address:

FEI Number: 65-0135417 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HRAWG CORP
1801 N. MILITARY TRAIL
SUITE 200
BOCA RATON, FL 33431 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: PD () Delete
Name: FORSTOT, JOSEPH
Address: 1050 NW 15TH STREET SUITE 212A
City-St-Zip: BOCA RATON, FL 33486 US

Title: D () Delete
Name: RIGGS, DAVID A
Address: 1050 NW 15TH STREET SUITE 212A
City-St-Zip: BOCA RATON, FL 33486 US

Title: D () Delete
Name: DOYLE, MICHAEL
Address: 1050 NW 15TH STREET SUITE 212A
City-St-Zip: BOCA RATON, FL 33486 US

Title: D () Delete
Name: RYDER, GREGORY
Address: 1050 NW 15TH STREET SUITE 212A
City-St-Zip: BOCA RATON, FL 33486 US

Title: D () Delete
Name: APPEL, BENITA
Address: 1050 NW 15TH STREET SUITE 212A
City-St-Zip: BOCA RATON, FL 33486 US

Title: D () Delete
Name: SABIA, JOE
Address: 1050 NW 15TH STREET SUITE 212A
City-St-Zip: BOCA RATON, FL 33486 US

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:

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: JOSEPH Z FORSTOT

PRES

03/05/2009

Electronic Signature of Signing Officer or Director

Date