

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40547

FILED
Apr 03, 2008
Secretary of State

Entity Name: NO DOE SPORTSMENS CLUB, INC.

Current Principal Place of Business:

MONROE JOHNSON RD.
KINARD, FL 32449

New Principal Place of Business:

Current Mailing Address:

7901 SW MONROE JOHNSON ROAD
KINARD, FL 32449

New Mailing Address:

FEI Number: 59-3067727

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, STEVE
7901 SW MONROE JOHNSON ROAD
KINARD, FL 32449 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: VD () Delete
Name: MILES, JEFFREY
Address: 5197 STEWART DRIVE
City-St-Zip: PANAMA CITY, FL 32401

Title: PD () Delete
Name: JOHNSON, RODNEY
Address: 7901 SW MONROE JOHNSON ROAD
City-St-Zip: KINARD, FL 32449

Title: STD () Delete
Name: JOHNSON, STEVE
Address: 7901 SW MONROE JOHNSON ROAD
City-St-Zip: KINARD, FL 32449

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: BENTON, TONY
Address: 4813 HALSEY CIRCLE
City-St-Zip: PANAMA CITY, FL 32404

Title: PD (X) Change () Addition
Name: JOHNSON, STEVE
Address: 7901 SW MONROE JOHNSON ROAD
City-St-Zip: KINARD, FL 32449

Title: STD (X) Change () Addition
Name: JOHNSON, RODNEY
Address: 7901 SW MONROE JOHNSON ROAD
City-St-Zip: KINARD, FL 32449

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: STEVE JOHNSON

PD

04/03/2008

Electronic Signature of Signing Officer or Director

Date