

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42320

FILED
Jan 22, 2009
Secretary of State

Entity Name: CLASSIC BASKETBALL, INC.

Current Principal Place of Business:

2075 W FIRST STREET
300
FORT MYERS, FL 33901

New Principal Place of Business:

5249 SUMMERLIN COMMONS BLVD.
100
FORT MYERS, FL 33907

Current Mailing Address:

P.O. BOX 1020
FT. MYERS, FL 33902

New Mailing Address:

FEI Number: 65-0243879 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLOCK, WILLIAM C
14430 DEVINGTON WAY
FORT MYERS, FL 33912 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: D () Delete
Name: WHITLEY, TREVOR
Address: 11611 NAVORROWAY
City-St-Zip: FORT MYERS, FL 33908

Title: DP () Delete
Name: POLLOCK, WILLIAM C
Address: 14430 DEVINGTON WAY
City-St-Zip: FT MYERS, FL 33912

Title: D () Delete
Name: SHIPLEY, BRAD
Address: 16143 MOUNT ABBEY WAY #101
City-St-Zip: FORT MYERS, FL 33908

Title: DT () Delete
Name: WHITLEY, STEVEN R
Address: 15783 SILVERADO CT SW
City-St-Zip: FORT MYERS, FL 33908

Title: D () Delete
Name: SEDGWICH, DWIGHT R
Address: 4141 ORANGE GROVE BLVD
City-St-Zip: FORT MYERS, FL 33903

Title: D () Delete
Name: KRICHBAUM, RICHARD
Address: 12470 COCONUT CREEK CT
City-St-Zip: FORT MYERS, FL 33908

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
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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: STEVEN R. WHITLEY

D

01/22/2009

Electronic Signature of Signing Officer or Director

Date