

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 19, 2006
Secretary of State**

DOCUMENT# N43693

Entity Name: FLORIDA STATE REFEREES, INCORPORATED

Current Principal Place of Business:

6671 W. INDIANTOWN RD.
SUITE 56-305
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

6671 W. INDIANTOWN RD.
SUITE 56-305
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 59-3134337 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICHNA, JOZSEF A
6671 W. INDIANTOWN RD.
STE 56-305
JUPITER, FL 33458 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: SRA () Delete
Name: MICHNA, JOZSEF A
Address: 6671 W. INDIANTOWN ROAD, SUITE 56-305
City-St-Zip: JUPITER, FL 334583991

Title: SDI () Delete
Name: BREAUX, ROBERT
Address: 751 ARAPAHO TRAIL
City-St-Zip: MAITLAND, FL 32751

Title: SCRA () Delete
Name: KENNEY, CHARLES R
Address: P.O. BOX 1897
City-St-Zip: DE LEON SPRINGS, FL 32130

Title: SDA () Delete
Name: SLOWINSKI, RAYMOND
Address: 10615 N. W. 40TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOZSEF A. MICHNA

SRA

02/19/2006

Electronic Signature of Signing Officer or Director

Date