2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# N93000000774

Entity Name: DINSMORE SPORTS ASSOCIATION, INC.

Current Principal Place of Business:

7126 CIVIC CLUB RD.
JACKSONVILLE, FL 32219 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 26873
JACKSONVILLE, FL 32226

New Mailing Address:

FEI Number: 59-3720897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KALLAS, JAMES M
6505 BARTH RD
JACKSONVILLE, FL 32219 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: T (X) Delete
Name: BAKER, CAROL M
Address: 9016 PLUMMER RD
City-St-Zip: JACKSONVILLE, FL 32219

Title: PD ( ) Delete
Name: KALLAS, JAMES M
Address: 6505 BARTH RD
City-St-Zip: JACKSONVILLE, FL 32219

Title: S ( ) Delete
Name: KALLAS, SANDRA
Address: 6505 BARTH ROAD
City-St-Zip: JACKSONVILLE, FL 32219

Title: SAA ( ) Delete
Name: HARRIS, ED
Address: 2509 WILMONT CT
City-St-Zip: JACKSONVILLE, FL 32218

Title: VPD ( ) Delete
Name: BAKER, JERRY
Address: 9016 PLUMMER ROAD
City-St-Zip: JACKSONVILLE, FL 32219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: HARRIS, KAREN
Address: 2509 WILMONT CT
City-St-Zip: JACKSONVILLE, FL 32219

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: MASSIE, DONNIE
Address: 7858 FOXTRAIL LANE
City-St-Zip: JACKSONVILLE, FL 32219

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: JAMES KALLAS PD 04/28/2008

Electronic Signature of Signing Officer or Director — Date