

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002392

FILED
Jan 24, 2012
Secretary of State

Entity Name: ALL SPORTS COMMUNITY SERVICE, INC.

Current Principal Place of Business:

5708 CLOUDS PEAK DRIVE
LUTZ, FL 33558 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 271506
TAMPA, FL 33688 US

New Mailing Address:

FEI Number: 59-3184150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEYS, TYRONE P
5708 CLOUDS PEAK DRIVE
LUTZ, FL 33558 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: ED
Name: KEYS, TYRONE
Address: 5708 CLOUDS PEAK DRIVE
City-St-Zip: LUTZ, FL 33558

Title: T
Name: BUBLEY, MARTIN A
Address: 3820 NORTHDAL BLVD.,STE. 312-B
City-St-Zip: TAMPA, FL 33624

Title: DP
Name: BUBLEY, DANIEL B
Address: 3820 NORTHDAL BLVD.,STE. 312-B
City-St-Zip: TAMPA, FL 33624

Title: VP
Name: MOORE, CARNELL
Address: ONE TAMPA CITY CENTER
City-St-Zip: TAMPA, FL 33602

Title: D
Name: TURNER, SUSAN DR
Address: 702 S. FIELDING
City-St-Zip: TAMPA, FL 33606

Title: D
Name: ULM, SCOTT
Address: 2966 N. DALE MABRY HWY.
City-St-Zip: TAMPA, FL 33622

I hereby 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 all other like empowered.

SIGNATURE: TYRONE P KEYS

PRES

01/24/2012

Electronic Signature of Signing Officer or Director

Date