

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005433

FILED  
Apr 15, 2005  
Secretary of State

**Entity Name:** THE SARASOTA WRESTLING BOOSTERS, INC.

**Current Principal Place of Business:**

4155 PONEA DRIVE  
SARASOTA, FL 34241 US

**New Principal Place of Business:**

**Current Mailing Address:**

4155 PONEA DRIVE  
SARASOTA, FL 34241 US

**New Mailing Address:**

**FEI Number:** 65-0491096

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERRY, MICHAEL D  
4155 PONEA DRIVE  
SARASOTA, FL 34241 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: PD ( ) Delete  
Name: WRIGHT, WILLIAMS  
Address: 3151 LOCKWOOD LAKE COURT  
City-St-Zip: SARASOTA, FL 34234

Title: SD (X) Delete  
Name: OSABEL LOPEZ, JUANA  
Address: 2725 STRATFORD DRIVE  
City-St-Zip: SARASOTA, FL 34232

Title: TD ( ) Delete  
Name: PERRY, MICHAEL D  
Address: 4155 PONEA DRIVE  
City-St-Zip: SARASOTA, FL 34241 US

**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL D. PERRY

TD

04/15/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date