

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000926

FILED
Apr 30, 2004
Secretary of State

Entity Name: CENTRAL FLORIDA SPORTS ACADEMY, INC.

Current Principal Place of Business:

1016 GAMMAGE POINT
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

1016 GAMMAGE POINT
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 59-3223941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORTON, STEVE
1016 GAMMAGE POINT
OVIEDO, FL 32765 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: MORTON, STEVE
Address: 1016 GAMMAGE POINT
City-St-Zip: OVIEDO, FL 32765

Title: D () Delete
Name: WOOLFOLK, CALVIN
Address: 6235 CHINABERRY DR
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: HORTON, JERRY
Address: 6131 SPARLING HILLS CIR
City-St-Zip: ORLANDO, FL 32808

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: STEVE MORTON

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date