

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # N96000003317 1. Entity Name PINE BAY WRESTLING CLUB INC.	
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Principal Place of Business C/O THOMAS E. KRAUSE ATTORNEY 9700 S DIXIE HWY SUITE 550 MIAMI, FL 33156	Mailing Address C/O THOMAS E. KRAUSE ATTORNEY 9700 S DIXIE HWY SUITE 550 MIAMI, FL 33156
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04252007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0684278	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

KRAUSE, THOMAS E
 9700 S DIXIE HWY #550
 MIAMI, FL 33156

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCLUSKEY, JON W TWO DATRAN CTR #1901, 9130 S DADELAND BLVD MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHAPRIO, DANIEL 15351 SW 87TH CT MIAMI, FL 33157
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT FISHER, MILTON 7520 SW 57 AVE. STE. A MIAMI, FL 33143
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THAYER, ALAN 10382 SW 144TH ST MIAMI, FL 33176
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/10/07-80026-013 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Milton G. Fisher AS TREASURER Date: 04-25-07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR