

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003317

FILED  
Sep 03, 2008  
Secretary of State

Entity Name: PINE BAY WRESTLING CLUB INC.

## Current Principal Place of Business:

C/O THOMAS E. KRAUSE ATTORNEY  
9700 S DIXIE HWY SUITE 550  
MIAMI, FL 33156

## New Principal Place of Business:

## Current Mailing Address:

C/O THOMAS E. KRAUSE ATTORNEY  
9700 S DIXIE HWY SUITE 550  
MIAMI, FL 33156

## New Mailing Address:

FEI Number: 65-0684278      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

KRAUSE, THOMAS E  
9700 S DIXIE HWY #550  
MIAMI, FL 33156      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: D ( ) Delete  
Name: MCLUSKEY, JON W  
Address: TWO DATRAN CTR #1901, 9130 S DADELAND BLVD  
City-St-Zip: MIAMI, FL 33156

Title: PD ( ) Delete  
Name: SHAPRIO, DANIEL  
Address: 15351 SW 87TH CT  
City-St-Zip: MIAMI, FL 33157

Title: DT ( ) Delete  
Name: FISHER, MILTON  
Address: 7520 SW 57 AVE. STE. A  
City-St-Zip: MIAMI, FL 33143

Title: D ( ) Delete  
Name: THAYER, ALAN  
Address: 10382 SW 144TH ST  
City-St-Zip: MIAMI, FL 33176

## 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:

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

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: MILTON G. FISHER

DT

09/03/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date