

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004374

FILED
Jan 15, 2008
Secretary of State

Entity Name: SPORTSPLEX AT CORAL SPRINGS ASSOCIATION, INC.

Current Principal Place of Business:

3099 EAST COMMERCIAL BLVD.
SUITE 200
FT. LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

3099 EAST COMMERCIAL BLVD.
SUITE 200
FT. LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 02-0574866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOREN, SAMUEL S
3099 E. COMMERCIAL BLVD.
SUITE 200
FT. LAUDERDALE, FL 33308 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: MESSENHEIMER, THOMAS E
Address: 2575 SPORTSPLEX DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VD () Delete
Name: CAMPOL, JEFF
Address: 3299 SPORTSPLEX DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S () Delete
Name: WILLIAMS, MARIANNE
Address: 2575 SPORTSPLEX DRIVE
City-St-Zip: CORAL SPRINGS, FL

Title: TD () Delete
Name: MCGOUN, MICHAEL
Address: 12441 ROYAL PALM BLVD
City-St-Zip: CORAL SPRINGS, FL 33065

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: THOMAS E. MESSENHEIMER

PD

01/15/2008

Electronic Signature of Signing Officer or Director

Date