2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000000871

Entity Name: EAST LAKE EAGLES WRESTLING BOOSTERS, INC.

FILED May 11, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2619 WARWICK TERRACE PALM HARBOR, FL 34685				1300 SILVER EAGLE DR TARPON SPRINGS, FL 34689		
Current Mailing Address:				New Mailing Address:		
2619 WARWICK TERRACE PALM HARBOR, FL 34685				3885 CAPITOL DR PALM HARBOR, FL 34685		
FEI Number:	: 59-3604020	FEI Number Applied For()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
ROBERTS, KATHY 2619 WARWICK TERRACE PALM HARBOR, FL 34685				TRIPOLI, THOMAS 3885 CAPITOL DR PALM HARBOR, FL 34685		
	named entity set of Florida.	ubmits this statement for the p	ourpose o	f changing it	s registere	d office or registered agent, or both,
SIGNATURE: THOMAS TRIPOLI Electronic Signature of Registered Agent				05/11/2003		
						Date
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGI	ES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	P () Delete ROBERTS, KATHY 2619 WARWICK TERRACE PALM HARBOR, FL 34685			Title: Name: Address: City-St-Zip:	P (X) Change () Addition TRIPOLI, THOMAS 3885 CAPITOL DR PALM HARBOR, FL 34685	
Title: Name: Address: City-St-Zip:				Title: Name: Address: City-St-Zip:	VP (X) Change () Addition MAHR, MONIQUE 3334 WEDGEWOOD WAY TARPON SPRINGS, FL 34689	
Title: Name: Address: City-St-Zip:	D () HAFNER, VICKI 1381 FORESTE OLDSMAR, FL	Delete DGE BLVD.		Title: Name: Address: City-St-Zip:		(X) Change ()Addition RRY LEWOOD LN SOR, FL 34685
Title: Name: Address: City-St-Zip:	T () GERMUSKA, MI 2512 WOODCO PALM HARBOR	TE		Title: Name: Address: City-St-Zip:		(X) Change () Addition A, MICHAEL DCOTE TERRACE BOR, FL 34685
Title: Name: Address: City-St-Zip:	D () COLLINS, PETE 1831 MARILYN CLEARWATER,	DRIVE		Title: Name: Address: City-St-Zip:		() Change () Addition

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 GERMUSKA 05/11/2003 D