010-033-$61.25-$61.25

ANNUAL REPORT
1999

Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 01, 1999 8:00 am
Secretary of State
06-01-1999 90010 033 ****61.25

DOCUMENT # N97000002607

1. Corporation Name
PATRIOTS WRESTLING CLUB, INC.

Principal Place of Business	Mailing Address
6305 118TH AVENUE NORTH LARGO FL 33773	15526 NEWPORT ROAD CLEARWATER FL 33764 US

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26 11451 80th AVE. N.	05/05/1997
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3447798 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28 SEMINOLE, FL	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip / Country 24 25	Zip / Country 29 33772 30 PINELLAS	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

BOONE, DARRELL
15526 NEWPORT ROAD
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name: JULIA BANN
82 Street Address (P.O. Box Number is Not Acceptable): 11451 80th AVE.N.
83
84 City: SEMINOLE FL 85 Zip Code: 33772

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☑ DELETE	1.1 TITLE	(PRESIDENT)	☑ Change ☐ Addition
NAME	BOONE, DARRELL		1.2 NAME	JULIA BANN	
STREET ADDRESS	15526 NEWPORT ROAD		1.3 STREET ADDRESS	11451 80TH AVE.N.	
CITY-ST-ZIP	CLEARWATER FL 34624		1.4 CITY-ST-ZIP	SEMINOLE FL 33772	
TITLE	VP	☑ DELETE	2.1 TITLE	(VP)	☑ Change ☐ Addition
NAME	VANSICKEL, KATHY		2.2 NAME	ROBERT M. GRIMMER	
STREET ADDRESS	11300 66TH ST. APT. #810		2.3 STREET ADDRESS	6860 96th AVE.N.	
CITY-ST-ZIP	PINELLAS PARK FL 33773		2.4 CITY-ST-ZIP	PINELLAS PARK, FL 33782	
TITLE	T	☑ DELETE	3.1 TITLE	(TREASURER)	☑ Change ☐ Addition
NAME	ROBERTS, BARBARA		3.2 NAME	CHRISTOPHER G. STERN	
STREET ADDRESS	6412 44TH AVE. N		3.3 STREET ADDRESS	7450 35th ST. N. #501	
CITY-ST-ZIP	KENNETH CITY FL 33709		3.4 CITY-ST-ZIP	PINELLAS PARK, FL 33781	
TITLE	D	☑ DELETE	4.1 TITLE	D [redacted]	☑ Change ☐ Addition
NAME	WALTON, JEREMY		4.2 NAME	BARBARA ROBERTS	
STREET ADDRESS	5969 115TH CIR N.		4.3 STREET ADDRESS	6412 44th AVE.N.	
CITY-ST-ZIP	PINELLAS PARK FL 33782		4.4 CITY-ST-ZIP	KENNETH CITY, FL 33709	
TITLE	D	☑ DELETE	5.1 TITLE	D GLEN BANN (ADDRESS)	☑ Change ☐ Addition
NAME	STERN, SCOTT		5.2 NAME	11451 80th AVE.N.	
STREET ADDRESS	4540 76TH AVE. N. APT#11		5.3 STREET ADDRESS		
CITY-ST-ZIP	PINELLAS PARK FL 33781		5.4 CITY-ST-ZIP	SEMINOLE, FL 33772	
TITLE	D	☑ DELETE	6.1 TITLE	D DAVE MAUGER	☑ Change ☐ Addition
NAME	BOONE, NINA		6.2 NAME	4191 58th WAY N.	
STREET ADDRESS	15526 NEWPORT ROAD		6.3 STREET ADDRESS	St. Pete, FL 33709	
CITY-ST-ZIP	CLEARWATER FL 34624		6.4 CITY-ST-ZIP		

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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIA BANN REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #