

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000144

FILED  
May 03, 2005  
Secretary of State

**Entity Name:** WESTERN AREA ROLLER HOCKEY LEAGUE, INC.

**Current Principal Place of Business:**

1304 SW 160TH AVENUE  
PMB #281  
SUNRISE, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1304 SW 160TH AVENUE  
PMB #281  
SUNRISE, FL 33326

**New Mailing Address:**

**FEI Number:** 65-0817368      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

**Name and Address of New Registered Agent:**

ANDRESEN, SCOTT R  
16900 SW 5TH STREET  
FT LAUDERDALE, FL 33326      US

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: ANDRESEN, SCOTT R  
Address: 16900 SW 5TH STREET  
City-St-Zip: FT LAUDERDALE, FL 33326

Title: VD      ( ) Delete  
Name: SCHMIDT, RON  
Address: 585 STONEMONT DRIVE  
City-St-Zip: WESTON, FL 33326

Title: SD      ( ) Delete  
Name: PUTTEET, JERRY  
Address: 13177 NW 11 PL  
City-St-Zip: SUNRISE, FL 33323

**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:

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: SCOTT R ANDRESEN

PD

05/03/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date