


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90470 003 ****61.25

DOCUMENT # N98000003587						
1. Entity Name END-TIME CHAMPIONS, INC.						
Principal Place of Business 3621 71ST TERR. E SARASOTA, FL 34243			Mailing Address P O BOX 21425 BRADENTON, FL 34204			
2. Principal Place of Business - No/P.O. Box # 2432 Manatee Ave E.		3. Mailing Address Same as Box 1				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State Bradenton, FL		City & State		4. FEI Number 65-0872562		
Zip 34208		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent NAGLE, JAMES F 3621 71ST TERR. E SARASOTA, FL 34243			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____						
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees		
Make check payable to Florida Department of State						
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE PTD	NAME NAGLE, JAMES F		<input type="checkbox"/> Delete	TITLE	NAME	
STREET ADDRESS 3621 71ST TERR. E	CITY - ST - ZIP SARASOTA, FL 34243			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE VPSD	NAME NAGLE, JANICE E		<input type="checkbox"/> Delete	TITLE	NAME	
STREET ADDRESS 3621 71ST TERR. E	CITY - ST - ZIP SARASOTA, FL 34243			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE D	NAME MURRAY, DAVID R		<input type="checkbox"/> Delete	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 3308 4TH ST E	CITY - ST - ZIP BRADENTON, FL			D Murray David R. 2597 Oak Grove Rd Westville, FL 32464		
TITLE D	NAME SMITH, MARTIN DR		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS 2316 85TH ST. NW	CITY - ST - ZIP BRADENTON, FL 34209					
TITLE	NAME		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	CITY - ST - ZIP					
TITLE	NAME		<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS	CITY - ST - ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						
SIGNATURE: <i>James F. Nagle</i>			SIGNATURE: <i>James F. Nagle</i>		4-25-07	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		DAYTIME PHONE #	