

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006290

FILED
Jul 19, 2005
Secretary of State

Entity Name: STUART WRESTLING CLUB, INC.

Current Principal Place of Business:

1042 SE 14TH ST
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

1042 SE 14TH ST
STUART, FL 34996

New Mailing Address:

FEI Number: 65-0869194 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

CRONIN, KEVIN S
1042 SE 14TH ST
STUART, FL 34996 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: PT () Delete
Name: CRONIN, KEVIN S
Address: 1042 SE 14TH ST
City-St-Zip: STUART, FL 34996

Title: TT () Delete
Name: HERNDON, SANDY
Address: 862 SW KEATS AVE
City-St-Zip: PALM CITY, FL 34990

Title: ST () Delete
Name: GUIDANI, JENNIFER
Address: 248 S.E. ST. LUCIE BLVD., APT. 104
City-St-Zip: STUART, FL 34996

Title: VT () Delete
Name: MUNAO, NATE
Address: 2400 LAKERIDGE DR
City-St-Zip: PALM CITY, FL 34990

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 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: KEVIN S. CRONIN

PT

07/19/2005

Electronic Signature of Signing Officer or Director

Date