

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006654

FILED  
May 01, 2005  
Secretary of State

Entity Name: UNIVERSITY BOXING CLUB, INC.

## Current Principal Place of Business:

1415 UNIVERSITY BLVD.  
MELBOURNE, FL 32901

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 790  
MELBOURNE, FL 32902 US

## New Mailing Address:

P.O. BOX 121709  
WEST MELBOURNE, FL 32912 US

FEI Number: 59-3550897      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:

MCCLELLAND, CLIFFTON A JR  
1499 S HARBOR CITY BLVD  
SUITE 201  
MELBOURNE, FL 32901 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: PD ( ) Delete  
Name: SCHMITT, WILLIAM R  
Address: 1415 UNIVERSITY BLVD.  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: GREGORY, GARY T  
Address: 1415 UNIVERSITY BLVD.  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: DEVLIN, DENISE C  
Address: 1415 UNIVERSITY BLVD.  
City-St-Zip: MELBOURNE, FL 32901

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SCHMITT, WILLIAM R  
Address: 1415 UNIVERSITY BLVD.  
City-St-Zip: MELBOURNE, FL 32901

Title: VP (X) Change ( ) Addition  
Name: GREGORY, GARY T  
Address: 1415 UNIVERSITY BLVD.  
City-St-Zip: MELBOURNE, FL 32901

Title: S/T (X) Change ( ) Addition  
Name: DEVLIN, DENISE C  
Address: 1415 UNIVERSITY BLVD.  
City-St-Zip: MELBOURNE, FL 32901

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: DENISE DEVLIN

S/T

05/01/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date