2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P01000007264

Entity Name

MILLENNIUM PAINT BALL PRODUCTIONS, INC.



FILED Feb 01, 2008 08:00 AN Secretary of State

			OD WE I				
Principal Plac	e of Business	Mailing Address	•				
670 COUNTRY CLUB DRIVE CRYSTAL RIVER FL 34429 US		670 COUNTRY CLUB DRIVE CRYSTAL RIVER FL 34429 US					
2. Principal F	Place of Business - No P.O. Box #	3. Mailing Address					
Suite, Apt. #, etc.		Suite Apt. #. etc.		1st	1st MOORE CR2E034 (10/07)		
City & State		City & State		4. FEI Numbe	59-3714402	Applied For Not Applicable	
Zıp	Country	Zip	Country	5. Certificate		8.75 Additional	
	6. Name and Address of Current	Registered Agent		7. Name and	Address of New Registered Ag	jent	
			Name				
TORRICELLI, BENEDICT 670 COUNTRY CLUB DRIVE CRYSTAL RIVER FL 34429		Street Addre		dress (P.O. Box Numbe	s (P.O. Box Number is Not Acceptable)		
			City		FL	Zip Code	
9 The apove	named entity submits this statement fo	r the purpose of changing de	registered office or re	egistered agent or bot		miliar with and accept	
	tions of registered agent.	i me paroose or changing its	registered since of re	egisiered agent, or cot	in, in the state of Frontia. Tanina	mina: with, and accept	
SIGNATURE	Squature, typed or praired hense of any sterod attent.	and the Tampicasio (NOT)	E Registered Ager Fatgnatura	required when reinstating)	DATE:	· · ·	
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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 607. 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE

NAME STREET ADDRESS

CITY-ST-ZIP

SOUND SOURCE SOURCE SOURCE OF DIRECTOR

nnie Torvicelli 1-25-08 3.

352-795-069