

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000026448

FILED
Mar 12, 2007
Secretary of State

Entity Name: LARRY COKER FOOTBALL, INC.

Current Principal Place of Business:

5821 SAN AMARO DRIVE
CORAL GABLES, FL 33146 US

New Principal Place of Business:

5577 ARBOR LANE
CORAL GABLES, FL 33156 US

Current Mailing Address:

5821 SAN AMARO DRIVE
CORAL GABLES, FL 33146 US

New Mailing Address:

5577 ARBOR LANE
CORAL GABLES, FL 33156 US

FEI Number: 65-1085357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COKER, LARRY PRES.
5821 SAN AMARO DR
CORAL GABLES, FL 33146 US

Name and Address of New Registered Agent:

COKER, LARRY PRES.
5577 ARBOR LANE
CORAL GABLES, FL 33156 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: LARRY COKER

03/12/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: COKER, LARRY
Address: 5821 SAN AMARO DRIVE
City-St-Zip: CORAL GABLES, FL 33146 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: COKER, LARRY
Address: 5577 ABROR LANE
City-St-Zip: CORAL GABLES, FL 33156 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY COKER

PRES

03/12/2007

Electronic Signature of Signing Officer or Director

Date