FILED

2003 FOR PROFIT CORPORATION

Apr 30, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT/(UBR P02000002348 DOCUMENT # 04-30-2003 90160 045 ***150.00 1. Entity Name VG SPORTS, INC Principal Place of Business Mailing Address 6910 WEST UNIVERSITY AVENUE 6910 WEST UNIVERSITY AVENUE SUITE 3 SUITE 3 GAINESVILLE FL 32607 GAINESVILLE FL 32607 2. Principal Place of Business 3. Mailing Address 1619 SW 75th 1619 SW 75th Terrace Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Applied For 30-0028927 F1 3220 Cairesville Cainesulle Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent INGLEY, HERBERT A III Street Address (P.O. Box Number is Not Acceptable) 6910 WEST UNIVERSITY AVENUE SUITE 3 1619 SW 75th Terrace **GAINESVILLE FL 32607** Coamesville 8. The above named entity submits this statement for the purpossof changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND 11. SECTORS IN 11 Delete TITLE TITLE Addition derbert A.I RIDDLE, BARRY D NAME NAME STREET ADDRESS 6910 WEST UNIVERSITY AVENUE, SUITE 3 STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL 32607 CITY-ST-ZIP V. 3.33 X Delete TITLE TITLE Change Addition INGLEY, HERBERT A III NAME NAME STREET ADDRESS 6910 WEST UNIVERSITY AVENUE, SUITE 3 STREET ADDRESS **GAINESVILLE FL 32607** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME

12. Thereby certify that the information supplied with this filing does not qualify 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 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

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME

□ Delete

Change

Addition