

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000008170

FILED  
Apr 26, 2006  
Secretary of State

Entity Name: INTERNATIONAL HOOP CAMPS, INC.

## Current Principal Place of Business:

5229 BUTLER RIDGE DRIVE  
WINDERMERE, FL 34786

## New Principal Place of Business:

3525 COLMAR QUARTER  
NORFOLK, VA 23509

## Current Mailing Address:

5229 BUTLER RIDGE DRIVE  
WINDERMERE, FL 34786

## New Mailing Address:

3525 COLMAR QUARTER  
NORFOLK, VA 23509

FEI Number: 01-0586214

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FITZPATRICK, MARTIN A  
215 S. MONROE ST., STE. 400  
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DCEO ( ) Delete  
Name: FITZPATRICK, MICHAEL A  
Address: 5229 BUTLER RIDGE DRIVE  
City-St-Zip: WINDERMERE, FL 34786

Title: D ( ) Delete  
Name: FITZPATRICK, MATTHEW J  
Address: 439 VICKS LANDING DRIVE  
City-St-Zip: APOKA, FL 32712

Title: D ( ) Delete  
Name: KARAFFA, JOHN  
Address: 3525 COLMAR QUARTER  
City-St-Zip: NORFOLK, VA 23509

Title: S ( ) Delete  
Name: FITZPATRICK, MARTIN A  
Address: 215 S. MONROE ST., STE. 400  
City-St-Zip: TALLAHASSEE, FL 32301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCEO (X) Change ( ) Addition  
Name: FITZPATRICK, MICHAEL A  
Address: 3525 COLMAR QUARTER  
City-St-Zip: NORFOLK, VA 23509

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 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: JOHN KARAFFA

D

04/26/2006

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

\_\_\_\_\_  
Date