

# **2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000081124

**FILED**  
**Mar 26, 2008**  
**Secretary of State**

**Entity Name:** FINISH LINE SALES AND SERVICE, INC.

**Current Principal Place of Business:**

1986 ALTERNATE 19 N  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

**Current Mailing Address:**

1986 ALTERNATE 19 N  
TARPON SPRINGS, FL 34689 US

**New Mailing Address:**

**FEI Number:** 03-0477776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GORDON, MARYANN DPST  
11314 PORTSMOUTH ST.  
SPRINGHILL, FL 34609 US

**Name and Address of New Registered Agent:**

FIorenza, ANTHONY DPS  
1603 DEBONAIR DR  
HOLIDAY, FL 34690 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: ANTHONY FIORENZA

03/26/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DPST ( ) Delete  
Name: GORDON, MARYANN  
Address: 11314 PORTSMOUTH ST  
City-St-Zip: SPRINGHILL, FL 34609

Title: 0 ( ) Delete  
Name: FIORENZA, ANTHONY  
Address: 1603 DEBONAIR DR  
City-St-Zip: HOLIDAY, FL 34690

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPS (X) Change ( ) Addition  
Name: FIORENZA, ANTHONY  
Address: 1603 DEBONAIR DR  
City-St-Zip: HOLIDAY, FL 34690

Title: T (X) Change ( ) Addition  
Name: GORDON, MARYANN  
Address: 11314 PORTSMOUTH ST  
City-St-Zip: SPRINGHILL, FL 34609

I hereby certify that the information supplied with this filing does not qualify 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: ANTHONY FIORENZA

DPS

03/26/2008

Electronic Signature of Signing Officer or Director

Date