

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015120

Entity Name: CLASSIC GAME SOURCE, INC.

FILED  
Jan 19, 2007  
Secretary of State

## Current Principal Place of Business:

3500 SOUTH STREET  
TITUSVILLE, FL 32780

## New Principal Place of Business:

## Current Mailing Address:

3500 SOUTH STREET  
TITUSVILLE, FL 32780

## New Mailing Address:

FEI Number: 56-2321872

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PETERSON, SUSAN A VP  
3500 SOUTH STREET  
TITUSVILLE, FL 32780 US

## Name and Address of New Registered Agent:

PETERSON, SUSAN A VP  
5145 US HWY 1  
MIMS, FL 32754 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:

01/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: PETERSON, JAMES J PRES  
Address: 5145 US HWY 1  
City-St-Zip: MIMS, FL 32754

Title: SEC ( ) Delete  
Name: PETERSON, MICHELLE L SEC  
Address: 5145 US HWY 1  
City-St-Zip: MIMS, FL 32754

Title: VP ( ) Delete  
Name: PETERSON, SUSAN A VP  
Address: 5145 US HWY 1  
City-St-Zip: MIMS, FL 32754

Title: SEC ( ) Delete  
Name: UNNEVER, BRIDGETTE A SECRETA  
Address: 5145 US HWY 1  
City-St-Zip: MIMS, FL 32754

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TREA (X) Change ( ) Addition  
Name: PETERSON, MICHELLE L TREAS  
Address: 5145 US HWY 1  
City-St-Zip: MIMS, FL 32754

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: JAMES J PETERSON

PRES

01/19/2007

Electronic Signature of Signing Officer or Director

Date