

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000085264

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: TALKNSPORTS, INC.

## Current Principal Place of Business:

7451 COLONIAL COURT  
SANFORD, FL 32771

## New Principal Place of Business:

7280 SW HWY 200  
OCALA, FL 34476

## Current Mailing Address:

7451 COLONIAL COURT  
SANFORD, FL 32771

## New Mailing Address:

7280 SW HWY 200  
OCALA, FL 34476

FEI Number: 20-0144927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HALL, JANET K  
7451 COLONIAL COURT  
SANFORD, FL 32771 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: P ( ) Delete  
Name: COX, BRUCE L  
Address: 7451 COLONIAL COURT  
City-St-Zip: SANFORD, FL 32771 US

Title: ST ( ) Delete  
Name: ADAMS, JAMES P  
Address: 7451 COLONIAL COURT  
City-St-Zip: SANFORD, FL 32771 US

Title: D ( ) Delete  
Name: HALL, JANET K  
Address: 7451 COLONIAL COURT  
City-St-Zip: SANFORD, FL 32771 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: COX, BRUCE L  
Address: 8546 W HOMOSASSA TRAIL  
City-St-Zip: HOMOSASSA SPRINGS, FL 34448 US

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 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: BRUCE L COX

P

04/23/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date