

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2006 8:00 am
Secretary of State

06-09-2006 90002 006 ***150.00

DOCUMENT # P05000122072

1. Entity Name
ST. CLOUD SPORTS, INC.



Principal Place of Business
**1401 BUDINGER AVENUE
SUITE H
ST. CLOUD, FL 34769 US**

Mailing Address
**1401 BUDINGER AVENUE
SUITE H
ST. CLOUD, FL 34769 US**

2. Principal Place of Business
3128 Communications Rd

3. Mailing Address
3128 Communications Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05242006 Chg-P CR2E034 (11/05)

City & State
St. Cloud, FL 34769

City & State
St. Cloud, FL 34769

4. FEI Number
20-3401196

Applied For
Not Applicable

Zip
34769

Country

Zip
34769

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**QUINN, DANNY R
4820 EAST LAKE RESERVE BLVD
ST. CLOUD, FL 34771**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
3128 Communications Rd

City
St. Cloud

FL

Zip Code
34769

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
QUINN, DANNY R
4820 EAST LAKE RESERVE BLVD
ST CLOUD, FL 34771** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
**3128 Communications Rd
St. Cloud, FL 34769**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an address, with all other like empowered.

SIGNATURE:

Danny Quinn, Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/6/06

407-691-7500

Date

Daytime Phone #