

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000003599

FILED
Jul 17, 2008
Secretary of State

Entity Name: PROFFESIONAL DEALER AND PLAYER SCHOOL, INC.

Current Principal Place of Business:

1233 LANE SOUTH AVE
STE 17
JACKSONVILLE, FL 32205

New Principal Place of Business:

Current Mailing Address:

1233 LANE SOUTH AVE
STE 17
JACKSONVILLE, FL 32205

New Mailing Address:

FEI Number: 20-4044030 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, CHARLES G II
4314 MELISSA CT WEST
JACKSONVILLE, FL 32210 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ALLEN, CHARLES G II
Address: 4314 MELISSA CT - WEST
City-St-Zip: JACKSONVILLE, FL 32210

Title: P () Delete
Name: ALLEN, CHARLES G II
Address: 4314 MELISSA CT - WEST
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: LAI, SIEW
Address: 896 SOUTHERN CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32259

Title: D () Delete
Name: GOODROW, ROBERT A
Address: 4314 MELISSA COURT - WEST
City-St-Zip: JACKSONVILLE, FL 32210

Title: D () Delete
Name: ALLEN, STEPHANIE F
Address: 17 B NORTH BROADWAY STREET
City-St-Zip: WINDGAP, PA 18091

Title: D () Delete
Name: ALLEN, DAWN R
Address: 181 PROSPECT STREET - APT. #1
City-St-Zip: SOUTH BOUND BROOK, NJ 08880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: CHARLES G. ALLEN, II

CEO

07/17/2008

Electronic Signature of Signing Officer or Director

_____ Date