

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000043078

Entity Name: BSN X-SPORT, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

5901 BROKEN SOUND PARKWAY NW  
6TH FLOOR  
BOCA RATON, FL 33487

## New Principal Place of Business:

## Current Mailing Address:

5901 BROKEN SOUND PARKWAY NW  
6TH FLOOR  
BOCA RATON, FL 33487

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

EDMONDS, TANYA  
5901 BROKEN SOUND PARKWAY NW  
6TH  
BOCA RATON, FL 33487 US

## Name and Address of New Registered Agent:

SCHILLAGE, BRENT V MR.  
5901 BROKEN SOUND PARKWAY NW  
6TH  
BOCA RATON, FL 33487 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: BRENT V. SCHILLAGE

05/01/2009

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: D ( ) Delete  
Name: FERGUSON, CHRIS  
Address: 5901 BROKEN SOUND PARKWAY NW, 6TH FLOOR  
City-St-Zip: BOCA RATON, FL 33487

Title: D ( ) Delete  
Name: JAMES, SCOTT  
Address: 5901 BROKEN SOUND PARKWAY NW, 6TH FLOOR  
City-St-Zip: BOCA RATON, FL 33487

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SCOTT JAMES

MR.

05/01/2009

Electronic Signature of Signing Officer or Director

Date