

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000022055

Entity Name: MCGIRT BOXING, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

9770 BAYMEADOWS ROAD STE 133  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

9770 BAYMEADOWS ROAD  
127  
JACKSONVILLE, FL 32256

## Current Mailing Address:

9770 BAYMEADOWS ROAD STE 133  
JACKSONVILLE, FL 32256

## New Mailing Address:

9770 BAYMEADOWS ROAD  
127  
JACKSONVILLE, FL 32256

FEI Number: 26-1889237

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCGIRT, GINA  
9770 BAYMEADOWS ROAD STE 133  
JACKSONVILLE, FL 32256 US

## Name and Address of New Registered Agent:

MCGIRT, GINA  
9770 BAYMEADOWS ROAD  
127  
JACKSONVILLE, FL 32256 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: GINA MCGIRT

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MCGRIT, GINA  
Address: 9770 BAYMEADOWS ROAD STE 133  
City-St-Zip: JACKSONVILLE, FL 32256

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: MCGRIT, GINA  
Address: 9770 BAYMEADOWS ROAD STE 127  
City-St-Zip: JACKSONVILLE, FL 32256

Title: O ( ) Change (X) Addition  
Name: THURMAN, CANDACE VP  
Address: 9770 BAYMEADOWS RD, STE 127  
City-St-Zip: JACKSONVILLE, FL 32256

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: CANDACE THURMAN

VP

04/28/2009

Electronic Signature of Signing Officer or Director

Date