2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# P08000059929

Entity Name: PRO ATHLETE CONSULTING, INC

Current Principal Place of Business:

2519 MONTERCY CT
WESTON, FL 33327

New Principal Place of Business:

2519 MONTEREY CT
WESTON, FL 33327

Current Mailing Address:

2519 MONTERCY CT
WESTON, FL 33327

New Mailing Address:

2519 MONTEREY CT
WESTON, FL 33327

FEI Number: 26-2853579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVINE, DAVID
2519 MONTERCY CT
WESTON, FL 33327 US

Name and Address of New Registered Agent:

LEVINE, DAVID
2519 MONTEREY CT
WESTON, FL 33327 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: DAVID LEVINE 04/22/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PT ( ) Delete
Name: LEVINE, DAVID
Address: 2519 MONTERCY CT
City-St-Zip: WESTON, FL 33327

Title: VS ( ) Delete
Name: LEVINE, DEBRA
Address: 2519 MONTERCY CT
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change ( ) Addition
Name: LEVINE, DAVID
Address: 2519 MONTEREY CT
City-St-Zip: WESTON, FL 33327

Title: VS (X) Change ( ) Addition
Name: LEVINE, DEBRA
Address: 2519 MONTEREY CT
City-St-Zip: WESTON, FL 33327

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: DAVID LEVINE P 04/22/2009
Electronic Signature of Signing Officer or Director Date