

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000076778

FILED
Jul 08, 2009
Secretary of State

Entity Name: PLAYERS ONLY SPORTS, INC.

Current Principal Place of Business:

41 HARBOR BOULEVARD
DESTIN, FL 32541

New Principal Place of Business:

Current Mailing Address:

41 HARBOR BOULEVARD
DESTIN, FL 32541

New Mailing Address:

FEI Number: 56-8014902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JAROSEWICZ, MICHAEL
804 JUPITER STREET
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

JAROSEWICZ, MICHAEL F MR
804 JUPITER STREET
DESTIN, FL 32541 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: MICHAEL JAROSEWICZ

07/08/2009

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: P () Delete
Name: JAROSEWICZ, MICHAEL
Address: 41 HARBOR BOULEVARD
City-St-Zip: DESTIN, FL 32541

Title: D () Delete
Name: PRICE, PATTI
Address: 41 HARBOR BOULEVARD
City-St-Zip: DESTIN, FL 32541

Title: V () Delete
Name: PRICE, CHAD
Address: 41 HARBOR BOULEVARD
City-St-Zip: DESTIN, FL 32541

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: JAROSEWICZ, MICHAEL F MR
Address: 41 HARBOR BOULEVARD
City-St-Zip: DESTIN, FL 32541

Title: D (X) Change () Addition
Name: PRICE, PATTI S MRS
Address: 41 HARBOR BOULEVARD
City-St-Zip: DESTIN, FL 32541

Title: V (X) Change () Addition
Name: PRICE, CHAD C MR
Address: 41 HARBOR BOULEVARD
City-St-Zip: DESTIN, FL 32541

Title: S () Change (X) Addition
Name: JAROSEWICZ, SOMMER L MRS
Address: 804 JUPITER ST
City-St-Zip: DESTIN, FL 32541

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: MICHAEL JAROSEWICZ

PRES

07/08/2009

Electronic Signature of Signing Officer or Director

Date