

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90105 029 ***150.00

DOCUMENT # P94000013057 1. Entity Name SPORTS FAN-ATTIC INC.					
Principal Place of Business 7371 SAWGRASS PT.DR. C/O JAMES DURDA PINELLAS PARK, FL 33782			Mailing Address 7371 SAWGRASS PT.DR. C/O JAMES DURDA PINELLAS PARK, FL 33782		
2. Principal Place of Business 9138 WATERASH LANE Suite, Apt. #, etc.		3. Mailing Address 9138 WATERASH LANE Suite, Apt. #, etc.			
City & State PINELLAS PARK, FL Zip 33782 Country		City & State PINELLAS PARK, FL Zip 33782 Country		4. FEI Number 59-3229862	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent DURDA, JAMES 7371 SAWBRASS PT.DR. PINELLAS PARK, FL 33782			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 9138 WATERASH LANE City PINELLAS PARK FL Zip Code 33782		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DURDA, JAMES 7371 SAWGRASS PT.DR. PINELLAS PARK, FL 33782 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9138 WATERASH LANE PINELLAS PARK, FL 33782	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DURDA, JOANNE 7371 SAWGRASS PT.DR. PINELLAS PARK, FL 33782 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 9138 WATERASH LANE PINELLAS PARK, FL 33782	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>James E. Dunda</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<u><i>4-18-06</i></u> <u><i>727.5450683</i></u> Date Daytime Phone #		