


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2008 08:00 AM
Secretary of State


DOCUMENT # P94000018627

1. Entity Name
CHAMPION SPORTS, INC.



Principal Place of Business 1333 MONTEREY BLVD NE ST. PETERSBURG, FL 33704 US	Mailing Address 1333 MONTEREY BLVD NE ST. PETERSBURG, FL 33704 US
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DO NOT WRITE IN THIS SPACE



07302008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3228969	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HOWE, RALPH E
1333 MONTEREY BLVD NE
ST. PETERSBURG, FL 33704

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEWBERRY, JANET S 1333 MONTEREY BLVD NE ST. PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HOWE, RALPH 1333 MONTEREY BLVD NE ST. PETERSBURG, FL
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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: *Ralph E. Howe* **RALPH E. HOWE** 7-30-08 727 894-5911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #