## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 18, 2005 08:00 AM DOCUMENT # P96000071023 **Secretary of State** 1. Entity Name ST. REGIS CHAMPIONS INC. Principal Place of Business . Mailing Address 3360 EAST BAY DRIVE P.O. BOX 5 LARGO, FL 33711 STOWE, VT 05672-005 01112005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 58-2270031 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent SOLLNER, RICHARD H DO NOT WRITE 2700 BARNETT PLAZA 101 E. KENNEDY BLVD. IN THIS SPACE TAMPA, FL 33602 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. Signature, typed or printed name of registered agent and this if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PD TITLE NAME GROSS, STEPHEN 1604 ST. REGIS BLVD. STREET ADDRESS CITY-ST-ZIP DORVAL, QUEBEC CANADA, h9p 1h6 STD TITLE NAME TEITLEBAUM, IRVING STREET ADDRESS 1604 ST. REGIS BLVD. U00000182873 DORVAL, QUEBEC CANADA, h9p 1h6 01/19/05-80045-024 150.00 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied that 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:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN 12 2005 (SIV)421-8720

FILED