## **2007 FOR PROFIT CORPORATION ANNUAL REPORT**

## **DOCUMENT # P98000004710**

1. Entity Name

ALW SPORTS MANAGEMENT, INC.



Mailing Address 40013360

01232007

3473 SATELLITE BLVD, STE 211 DULUTH, GA 30096

Principal Place of Business

3473 SATELLITE BLVD, STE 211 DULUTH, GA 30096

**FILED** Feb 12, 2007 8:00 am

**Secretary of State** 

02-12-2007 90069 017 \*\*\*150.00

## DO NOT WRITE IN THIS SPACE

CR2E034 (11/05)

<u>/70-</u>813-0090

Applied For ♣. FEI Number 59-3488342 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

GEIGER, ALLAN T 1301 RIVERPLACE BLVD. **SUITE 1500** JACKSONVILLE, FL 32207

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

No Chg-P

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. If am familiar with, and accept the obligations of registered agent.							
SIGNATURE							
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finant Trust Fund Contribution.		· -	\$5.00 May Be Added to Fees				
10.	OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, ARTHUR L JR 277 RÓYAL POINCIANA WAY, STE 1 PALM BEACH, FL 33480	35					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP KELLY, JAMES E 3473 SATELLITE BLVD., SUITE 211 DULUTH, GA 30096						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST WEED, PAULA 3473 SATELLITE LBVD., SUITE 211 DULUTH, GA 30096			DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
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 trustsee 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 end address, with all other like empowered.							

DIRECTOR