


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # P99000029340 1. Entity Name SPORTS & HOSPITALITY INTERNATIONAL, INC.	
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Principal Place of Business C/O BILLINGHAM ASSOCIATES, INC. 905 E.M.L. KING DR, SUITE 610 TARPON SPRINGS, FL 34689	Mailing Address C/O BILLINGHAM ASSOCIATES, INC. 905 E.M.L. KING DR, SUITE 610 TARPON SPRINGS, FL 34689
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01052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2457468	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 BILLINGHAM, PETER 905 E.M.L. KING DR, SUITE 610 TARPON SPRINGS, FL 34689

DO NOT WRITE IN THIS SPACE

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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HUTTON, SHIRLEY 4715 BALDWIN MANOR ROAD PITTSBURGH, PA 15227
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BILLINGHAM, PETER 905 E ML KING DRIVE STE 610 TARPON SPRINGS, FL 34689
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V HUTTON, HARRY 4715 BALOWIN MANOR RD PITTSBURGH, PA 15227
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/04/05-80043-020 150.00

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12. I hereby certify that the information supplied with this filing 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 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: Shirley A. Hutton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/05 412-481-2200
Date Daytime Phone #