

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000100711

FILED  
Mar 08, 2006  
Secretary of State

Entity Name: MULLIGAN'S FAMILY SPORTS PUBS, INC.

## Current Principal Place of Business:

13706 LITTLE RD.  
HUDSON, FL 34667

## New Principal Place of Business:

## Current Mailing Address:

1007 BALLINGER RD.  
LUTZ, FL 33548

## New Mailing Address:

FEI Number: 59-3610825

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

VAN VORIS, JOHN I  
501 E. KENNEDY BLVD.  
SUITE 1400  
TAMPA, FL 33601 US

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: SCHULTE, CHRISTIAN A  
Address: 3807 SOUTH CHURCH STREET  
City-St-Zip: TAMPA, FL 33611

Title: PS ( ) Delete  
Name: OVERBECK, CHRISTOPHER K  
Address: 1007 BALLINGER RD.  
City-St-Zip: LUTZ, FL 33548

Title: T ( ) Delete  
Name: OVERBECK, NICHOLAS K  
Address: 1007 BALLINGER RD  
City-St-Zip: LUTZ, FL 33548 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: SCHULTE, CHRISTIAN A  
Address: 1202 E. NORTH STREET  
City-St-Zip: TAMPA, FL 33604

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER K. OVERBECK

PS

03/08/2006

Electronic Signature of Signing Officer or Director

Date