

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 136947

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: FLORIDA SPORTSERVICE, INC.

## Current Principal Place of Business:

40 FOUNTAIN PLAZA  
BUFFALO, NY 14202 US

## New Principal Place of Business:

## Current Mailing Address:

40 FOUNTAIN PLAZA  
LAW DEPT. - 12TH FLOOR  
BUFFALO, NY 14202 US

## New Mailing Address:

FEI Number: 16-0435033      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: VPFT ( ) Delete  
Name: ROGGE, THERESA A  
Address: 40 FOUNTAIN PLAZA  
City-St-Zip: BUFFALO, NY 14202 US

Title: D ( ) Delete  
Name: KEMP, KAREN L  
Address: 40 FOUNTAIN PLAZA  
City-St-Zip: BUFFALO, NY 14202 US

Title: S ( ) Delete  
Name: TRYBUS, JANICE R  
Address: 40 FOUNTAIN PLAZA  
City-St-Zip: BUFFALO, NY 14202 US

Title: D ( ) Delete  
Name: KELLER, BRYAN J  
Address: 40 FOUNTAIN PLAZA  
City-St-Zip: BUFFALO, NY 14202 US

Title: PD ( ) Delete  
Name: ABRAMSON, RICK D  
Address: 40 FOUNTAIN PLAZA  
City-St-Zip: BUFFALO, NY 14202 US

Title: VCOO (X) Delete  
Name: HOUSER, JAMES W  
Address: 40 FOUNTAIN PLAZA  
City-St-Zip: BUFFALO, NY 14202 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: SZEFEL, DENNIS J  
Address: 40 FOUNTAIN PLAZA  
City-St-Zip: BUFFALO, NY 14202 US

Title: S (X) Change ( ) Addition  
Name: TRYBUS, JANICE R  
Address: 100 LEGENDS WAY  
City-St-Zip: BOSTON, MA 02114 US

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

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 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: THERESA A. ROGGE

Electronic Signature of Signing Officer or Director

VPFT

04/30/2009

Date