2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# 712137

Entity Name: OFFICIAL FORT LAUDERDALE BILLFISH TOURNAMENT, INC.

Current Principal Place of Business:

7400 E, COUNTRY CLUB BLVD.
BOCA RATON, FL 33487 US

New Principal Place of Business:

530 NW 78 WAY
PLANTATION, FL 33324 US

Current Mailing Address:

7400 E. COUNTRY CLUB BLVD.
BOCA RATON, FL 33487 US

New Mailing Address:

530 NW 78 WAY
PLANTATION, FL 33324 US

FEI Number: 23-7218760 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEPHENS, JOHN E JR
220 SW 32ND ST
FORT LAUDERDALE, FL 33315 US

Name and Address of New Registered Agent:

MCGOWAN, KATHLEEN A
530 NW 78 WAY
PLANTATION, FL 33324 US

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: KATHLEEN A. MCGOWAN 04/29/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: PIZZIFERRI, MICHELLE
Address: 7400 E. COUNTRY CLUB BLVD.
City-St-Zip: BOCA RATON, FL 33487

Title: SD ( ) Delete
Name: KOOSIER, RAY
Address: 300 NW 28 ST
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: P ( ) Delete
Name: STRAUSS, JAMIE
Address: 311 SW 24 STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: VD (X) Delete
Name: SMITH, SKIP
Address: 2931 NE 16 STREET
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: STRAUSS, JAMIE
Address: 311 SW 24 STREET
City-St-Zip: FORT LAUDERDALE, FL 33315

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

Title: VP (X) Change ( ) Addition
Name: SMITH, SKIP
Address: 2931 NE 16 STREET
City-St-Zip: POMPANO BEACH, FL 33062

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 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMIE STRAUSS P 04/29/2005
Electronic Signature of Signing Officer or Director Date