


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 08:00 AM
Secretary of State

DOCUMENT # 762102
 1. Entity Name
RAM FOOTBALL CLUB, INC.



Principal Place of Business ONE RAM WAY SARASOTA, FL 34231	Mailing Address ONE RAM WAY SARASOTA, FL 34231
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03172004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2191420	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**SPRAGUE, JOHN C
 7328 PALOMINO LANE
 SARASOTA, FL 34241**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)

**Filing Fee is \$61.25
 Due by May 1, 2004**

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

U00000122871
 04/21/04-80048-010 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD GRAY, PENNY 4548 SATINLEAF LN SARASOTA, FL 34241
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD ELLIS, SUE 5101 FAR OAK CIRCLE SARASOTA, FL 34238
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SPRAGUE, JOHN C 7328 PALOMINO LANE SARASOTA, FL 34241
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S DOOLEY, CHRISTINE 2237 MCINTOSH RD SARASOTA, FL 34232
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SPRAGUE, JOHN C. 3985 HELENE ST SARASOTA, FL 00000,
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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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)(b), 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 617, 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: John C. Sprague Penny Gray Pres. 4/19/04 941-929-9528
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #