2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Sep 20, 2004 8:00 am Secretary of State

DOCUMENT # F0300002906 1. Entity Name STARBOARD MEDIA FOUNDATION, INC.					09-20-2004 90001 005 ****61.25			
2300 RIVERSIDE DRIVE PO		Mailing Address PO BOX 1070 GREEN BAY, WI 543					5407	3146
	•							
	Place of Business	3. Mailing Address	_					
	erside Drive	P.O. Box 1070					,	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			08182004	Chg-NP	CR2E037 (10/03)	
City & State Green Bay, WI		City & State Green Bay, WI			4. FEI Number 39-2003			oplied For
Zip 5 4 301	Country USA	Zip 54307-0707	Country USA		5. Certificate o	f Status Desired	☐ \$8.75 Add	ditional
24201	6. Name and Address of Current		USA		-7 : Name and A	ricinese of New	Fee Require	o .
				ne			registered Agent	
NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE, FL 32301			Stre	et Address (P.O. Box Number is Not Acceptable)				
IALLAHA	55EE, FL 52501							
	4		City				FL Zip Cod	e
8. The above	named entity submits this statement for	or the purpose of changing	its registered offic	e or registers	ad agent or both	in the State of E		and appoint
the obligat	tions of registered agent.		no registeres eme	o or rogistore	sa agoni, or boin,	, in the state of t	torida. Tarriantikar with,	and accept
	· ·							
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (N	OTE: Registered Agent s	ignature required	when reinstation\		DATE	
		·				Benickov prvija		" Jan Britag - 18 2-8 g Konselle
Filing Fee is \$61.25 Due by September 8, 2004 Frust Fund Co.					\$5.00 May Be Added to Fees		Make check payable to oride Department of Si	ate "
10.	OFFICERS AND DI	RECTORS	11.	A	DDITIONS/CHAI	NGES TO OFFIC	ERS AND DIRECTORS IN	
TITLE	CEO	■ Delete	TITLE	CÉO a	and Directo	r	(24) Change	☐ Addition
NAME STREET ADDRESS	FOLLETT, MARK 2300 RIVERSIDE DRIVE	,	NAME Street addre			•		
CITY-ST-ZIP	GREEN BAY, WI 54301		CITY-ST-ZIP					
TITLE	Р	Delete	TITLE	Trea	surer, CFO		Change	X[X Addition
NAME	BROWNRIGG, SHERRY		NAME	Gera	ld L. Moore	•		
STREET ADDRESS	2300 RÍVERSIDE DRIVE	_	OTDCCT 40000					
CITY-ST-ZIP		34.	STREET ADDRE		Riverside			
	GREEN BAY, WI 54301	· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP	Gree	n Bay, WI			
TITLE	т ,	Delete	CITY-ST-ZIP		n Bay, WI		x⊠ Change	Addition
NAME	T ATWELL, ROBERT	□ Delete	CITY-ST-ZIP TITLE NAME	Direc	n Bay, WI		X⊠ Change	-
	T ATWELL, ROBERT 2300 RIVERSIDE DRIVE	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRE	Direc	n Bay, WI		>⊠ Change	-
NAME STREET ADDRESS	T ATWELL, ROBERT		CITY-ST-ZIP TITLE NAME STREET ADORE CITY-ST-ZIP	Direc	n Bay, WI			. Addition
NAME STREET ADDRESS CITY-ST-ZIP	T ATWELL, ROBERT 2300 RIVERSIDE DRIVE GREEN BAY, WI 54301	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRE	Direc	n Bay, WI		×⊠ Change ← Change	-
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	T ATWELL, ROBERT 2300 RIVERSIDE DRIVE GREEN BAY, WI 54301 S SNOREK, MARGARET R 2300 RIVERSIDE DRIVE		CITY-ST-ZIP TITLE NAME STREET ADORE CITY-ST-ZIP TITLE	Direc	n Bay, WI			. Addition
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14. I nereuy 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Gerald L. Moore, Treasurer

Date