2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 31, 2004 8:00 am **Secretary of State** DOCUMENT # N09672 1. Entity Name 03-31-2004 90013 041 ****61.25 WAY-FM MEDIA GROUP, INC. Principal Place of Business Mailing Address P.O. BOX 64500 6165 LEHMAN DR. COLORADO SPRINGS CO 80918 US COLORADO SPRINGS FL 80962 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 59-2659856 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHAFFER, GLEN Street Address (P.O. Box Number is Not Acceptable) 19150 ACORNI ROAD FORT MYERS FL 33913 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Prezident B Addition TITLE ☐ Delete TITLE AUGSBURG, ROBERT D. PUGSPUA NAME NAME 415 NEW LONDON WAY 322 13e4+ NGIL WAY STREET ADDRESS STREET ADDRESS MONUMENT CO 80132 20137 CCCITY-ST-ZIP CITY-ST-ZIP ☐ Delete 300164C14 Change Addition TITLE AUGSBURG, FELICE AUOSburg! Felice NAME NAME 415 NEW LONDON WAY 255 Bedt STREET ADDRESS STREET ADDRESS MONUMENT CO 80132 \mathcal{M} OUDMen \mathcal{M} CITY-ST-ZIP CITY-ST-ZIP DIR TITLE ☐ Delete TITLE Change Addition waads, Eer RHOADS, ERIC NAME 264 GOLF LINKS ST. STREET ADDRESS STREET ADDRESS PLEASANT HILL CA 94523 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE SCAGGS, JOHN NAME NAME 2026 CRESTHAVEN WALK STREET ADDRESS STREET ADDRESS WOODSTOCK GA 30189 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE SCHAFFER, GLEN NAME 19150 ACORNI ROAD STREET ADDRESS STREET ADDRESS FORT MYERS FL 33912 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TIT! F NEWTON, ROBBY NAME 171 AUTUMN DRIVE STREET ADDRESS STREET ADDRESS HARVEST AL 35749 CITY-ST-7IP CITY-ST-ZIP 12. I hereby 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 of 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.

FILED