

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 23, 2004
Secretary of State**

DOCUMENT# N95000003268

Entity Name: PORT ST. LUCIE AMATEUR RADIO ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 7461
PORT ST. LUCIE, FL 349859998

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7461
PORT ST. LUCIE, FL 349859998

New Mailing Address:

FEI Number: 65-0452015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOLDEVILLA, ROBINSON KENT
2851 SE PACE DR.
PORT SAINT LUCIE, FL 34984 US

Name and Address of New Registered Agent:

SOLDEVILLA, ROBINSON K TREAS.
2851 SE PACE DR.
PORT SAINT LUCIE, FL 34984 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: ROBINSON KENT SOLDEVILLA 01/23/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: COX, ROY
Address: 412 N.W. CORNELL AVE.
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: TRD () Delete
Name: ROBINSON, KENT S
Address: 2851 PACE DR
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: ST () Delete
Name: BENNER, CHARLES
Address: 1350 LAROSE CT.
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: V () Delete
Name: PLAYFORD, DON
Address: 141 SE LAKEHURST DR
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: D () Delete
Name: SASSON, MAURICE
Address: 8598 FLORENCE DR
City-St-Zip: PORT ST. LUCIE, FL

Title: D () Delete
Name: SALTER, SIDNEY
Address: 991 N.W. TUSCANY DR
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TRD (X) Change () Addition
Name: SOLDEVILLA, ROBINSON K
Address: 2851 PACE DR
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: ST (X) Change () Addition
Name: SOLDEVILLA, ROBINSON K
Address: 2851 SE PACE DR
City-St-Zip: PORT SAINT LUCIE, FL 34984-

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 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: ROBINSON KENT SOLDEVILLA TRD 01/23/2004
Electronic Signature of Signing Officer or Director Date