

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 25, 2005
Secretary of State**

DOCUMENT# N97000001205

Entity Name: RTC ENTERTAINMENT, INC.

Current Principal Place of Business:

742 CLAY STREET
STE C
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

742 CLAY STREET
STE C
WINTER PARK, FL 32789 US

New Mailing Address:

FEI Number: 59-3443654 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLESHER, NANCY R
229 ALMA STREET
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANNO, JOSEPH D
Address: 805 GARDEN BLEACHES LOOP
City-St-Zip: LAKE MARY, FL 32746

Title: VSD () Delete
Name: DE ROSA, ANTHONY
Address: 5672 CENTURY BLVD., #40
City-St-Zip: ORLANDO, FL 32807

Title: D () Delete
Name: MURPHY, JOHN
Address: 131 MARITIME DR
City-St-Zip: SANFORD, FL 32771

Title: D () Delete
Name: INELLO, ROBERT
Address: 187 BASS POINT RD
City-St-Zip: NAHANT, MA 01908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ANTHONY DEROSA

VSD

04/25/2005

Electronic Signature of Signing Officer or Director

_____ Date