# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 07, 2005**
**Secretary of State**

DOCUMENT# P01000059942

**Entity Name:** FINANCIAL MEDIA, INC.

**Current Principal Place of Business:**

3814 W. SANTIAGO STREET
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3814 W. SANTIAGO STREET
TAMPA, FL 33629

**New Mailing Address:**

**FEI Number: 59-3726027** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED
660 EAST JEFFERSON STREET
TALLAHASSEE, FL 323010000 US

**Name and Address of New Registered Agent:**

MIZE, LORI M PRES.
3814 W. SANTIAGO STREET
TAMPA, FL 336290000 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: LORI MIZE 04/07/2005
Electronic Signature of Registered Agent Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete
Name: MIZE, LORI
Address: 3814 W. SANTIAGO STREET
City-St-Zip: TAMPA, FL 33629

Title: D ( ) Delete
Name: MIZE, STEVE
Address: 3814 W. SANTIAGO STREET
City-St-Zip: TAMPA, FL 33629

Title: D ( ) Delete
Name: MIZE, DARREN
Address: 701 S. HOWARD AVE, SUITE 203
City-St-Zip: TAMPA, FL 33606

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LORI MIZE PRES 04/07/2005
Electronic Signature of Signing Officer or Director Date