

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000090777

FILED
Apr 11, 2007
Secretary of State

Entity Name: Z-92, INC.

Current Principal Place of Business:

1000 LEGION PLACE
SUITE 1700
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

1000 LEGION PLACE
SUITE 1700
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 59-3298042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHUFFIELD, W. CHARLES
1000 LEGION PLACE
SUITE 1700
ORLANDO, FL 32801 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPC () Delete
Name: MOADY, SAID
Address: 2307 LAKESIDE DR
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: GIBSON, JANE S
Address: 627 GENIUS DRIVE
City-St-Zip: ORLANDO, FL 32789

Title: D () Delete
Name: SHUFFIELD, KAREN
Address: 2307 LAKESIDE DR
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: STRACK, GARY
Address: 3318 LAKEVIEW OAKS DR
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: HANSON, MICHAEL
Address: 7350 HULL RD
City-St-Zip: ZIONSVILLE, IN 46077

Title: DP () Delete
Name: NATHAN, CHITTY
Address: 1344 SPRING LAKE DRIVE
City-St-Zip: ORLANDO, FL 32804

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: D (X) Change () Addition
Name: STRACK, GARY
Address: 4955 SANCTUARY LANE
City-St-Zip: BOCA RATON, FL 33431

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 Chapter 119, 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: NATHAN CHITTY

DP

04/11/2007

Electronic Signature of Signing Officer or Director

_____ Date