

2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 07, 2005
Secretary of State

DOCUMENT# 711206

Entity Name: PLATINUM COAST AMATEUR RADIO SOCIETY, INC.**Current Principal Place of Business:**PO BOX 1004
MELBOURNE, FL 32901 US**New Principal Place of Business:****Current Mailing Address:**P O BOX 1004
MELBOURNE, FL 329011004 US**New Mailing Address:****FEI Number:** 59-1842317**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MADDEN, TIMOTHY J
3335 GREENVILLE ST
COCOA, FL 329263704 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: HEISE, JAN A
Address: 2471 STRATFORD POINTE DRIVE
City-St-Zip: WEST MELBOURNE, FL 329048056 US

Title: VPD () Delete
Name: HENDRICKSON, KENNETH J
Address: 328 CINNAMON LAKE CIRCLE
City-St-Zip: MELBOURNE, FL 329018513 US

Title: SD () Delete
Name: TROSSMAN, ARNOLD S
Address: 257 MEEHAN AVENUE NW
City-St-Zip: PALM BAY, FL 32907 US

Title: D () Delete
Name: HILDRETH, JEFFERY L
Address: 660 DENISE DR
City-St-Zip: MELBOURNE, FL 32925 US

Title: TD () Delete
Name: MADDEN, TIMOTHY J
Address: 3335 GREENVILLE ST
City-St-Zip: COCOA, FL 329263704 US

Title: D () Delete
Name: WINN, DONNIE L
Address: 1882 BARKELY AVENUE
City-St-Zip: MELBOURNE, FL 32935 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: LOCHMAN, CURTIS V
Address: 3197 FAIRVIEW DR
City-St-Zip: MELBOURNE, FL 32935 US

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: TIMOTHY J MADDEN

TD

07/07/2005

Electronic Signature of Signing Officer or Director

Date