

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764727

FILED
Jul 05, 2005
Secretary of State

Entity Name: FLORIDA SPORTSCASTERS ASSOCIATION, INC.

Current Principal Place of Business:

2045 13TH STREET
VERO BEACH, FL 32960

New Principal Place of Business:

Current Mailing Address:

2045 13TH STREET
VERO BEACH, FL 32960

New Mailing Address:

FEI Number: 65-0042066 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CRAGO, RICHARD L.
2045 13TH STREET
VERO BEACH, FL 32960 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: CRAGO, RICHARD L.,
Address: 2045 13TH STREET
City-St-Zip: VERO BEACH, FL

Title: PD () Delete
Name: BABICK, STEVE
Address: POST OFFICE BOX 14485 N/A
City-St-Zip: GAINESVILLE, FL

Title: VD () Delete
Name: ATWELL, SCOT
Address: PO BOX 3048 N/A
City-St-Zip: TALLAHASSEE, FL

Title: SD () Delete
Name: GRAY, TIM
Address: 2824 PALM BEACH BOULEVARD
City-St-Zip: FORT MYERS, FL

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: RICHARD L. CRAGO

TD

07/05/2005

Electronic Signature of Signing Officer or Director

Date