2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H88231

1. Entity Name

SPORTSLINE COMMUNICATIONS, INC.



FILED Apr 02, 2008 08:00 AM Secretary of State

Principal Place of Business

1209 N. LEAVITT AVE. ORANGE CITY, FL 32763 Mailing Address

1209 N. LEAVITT AVE. ORANGE CITY, FL 32763



DO NOT WRITE IN THIS SPACE

03192008 No Chg-P CR2E034 (11/05)

4. FEI Number		Applied For
65-0189930	 	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	

6. Name and Address of Current Registered Agent

BERLINER, EDWARD J. 1209 N. LEAVITT AVE. PAISLEY, FL 32767

DO NOT WRITE IN THIS SPACE

7							
8. 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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE							
					<u> </u>		
FILE NOWI!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution		ing 🔲	\$5.00 May Be Added to Fees	04/11/08-80099-011 150.00			
10.	OFFICERS AND DIREC	CTORS					
TITLE	DP						
NAME	BERLINER, EDWARD J.						
STREET ADDRESS	1209 N. LEAVITT AVE.						
CITY-ST-ZIP	ORANGE CITY, FL 32763						
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information							
12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information							

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachnesh with all other like empowered.

SIGNATURE:

SIGNATURE AND PPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/1/08

386-851-0501

Daytime Phone #