## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000017237

Entity Name: INTREPID SPORTS MANAGEMENT, LLC

225 WATER STREEET, SUITE 2020

JACKSONVILLE, FL 32202 US

Address: City-St-Zip: FILED Mar 30, 2004 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4741 ATLANTIC BOULEVARD, SUITE D JACKSONVILLE, FL 32207					
Current M	ailing Addres	ss:	New Mailing Address:		
	NTIC BOULE VILLE, FL 322	VARD, SUITE D 207			
FEI Number:	61-1423874	FEI Number Applied For()	FEI Number Not Appli	icable ( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
225 WATE 2020	REGISTEREI R STREET VILLE, FL 322	O AGENT SERVICES, LLC 202			
The above in the State		submits this statement for the pu	rpose of changing it	s registered office or registered agent, or both	
SIGNATUR	RE:				
Electronic Signature of Registered Ager			nt Date		
MANAGIN	G MEMBERS	/MEMBERS:	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MCAFEE, MAT 225 WATER ST	Delete THEW S TREET, SUITE 2020 E, FL 32202 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	BROCKWELL, 4741 ATLANTIC	Delete PAUL H D BOULEVARD, SUITE D E, FL 32207 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CAMERLENGO 4741 ATLANTIO	Delete , JOSEPH V C BOULEVARD, SUITE D E, FL 32207 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	DRIVER, GARY 225 WATER ST	Delete ' R TREET, SUITE 2020 E, FL 32202 US	Title: Name: Address: City-St-Zip:	MGR (X) Change ( ) Addition DRIVER, GARY R JR 225 WATER STREET, SUITE 2020 JACKSONVILLE, FL 32202 US	
Title: Name:	MGR (X JOHNSON, TOI	) Delete DD C	Title: Name:	() Change () Addition	

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: G. RAY DRIVER, JR. MGR 03/30/2004