## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000000905

Jul 21, 2005 Secretary of State

Entity Name: FLORIDA ICE SPORT ENDOWMENT, INC. **Current Principal Place of Business: New Principal Place of Business:** 3301 SW 15TH AVE 318 S.E. 18TH TERRACE CAPE CORAL, FL 33914 CAPE CORAL, FL 33990 **Current Mailing Address: New Mailing Address:** 3301 SW 15TH AVE 318 S.E. 18TH TERRACE CAPE CORAL, FL 33914 CAPE CORAL, FL 33990 FEI Number: 16-1652725 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: BROWN, THOMAS H BROWN, THOMAS H 3301 SW 15TH AVE 318 S.E. 18TH TERRACE CAPE CORAL, FL 33914 US US CAPE CORAL, FL 33990 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: THOMAS H. BROWN 07/21/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition BROWN, THOMAS H BROWN, THOMAS H Name: Name: 3301 SW 15TH AVENUE Address: 318 S, E. 18TH TERRACE Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: CAPE CORAL, FL 33990 Title: ( ) Delete Title: () Change () Addition Name: LERMAN, ELLEN Name: Address: 2165 BELHAVEN WAY Address: City-St-Zip: ESTERO, FL 33928 City-St-Zip: Title: () Delete Title: () Change () Addition MEYER, ANDREA Name: Name: 12319 THIRD ST Address: Address: City-St-Zip: FT MYERS, FL 33905 City-St-Zip: Title: () Delete Title: () Change () Addition Name: PERSONS, MERRIL L Name: 2440 GUINEVERE COURT Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition SMTIH, CINDY Name: Name: 5229 CEDARBEND DRIVE Address: Address: City-St-Zip: City-St-Zip: FORT MYERS, FL 33919

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: THOMAS H. BROWN P 07/21/2005