## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000004748

Name:

Address:

City-St-Zip:

KASPER, TIMOTHY J

SARASOTA, FL 34239

2591 JEFFERSON CIRCLE

Entity Name: MOVIES & SHAKERS, INC.

FILED Jul 06, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 7110 FAIRWAY BEND LANE SARASOTA, FL 34243 **New Mailing Address: Current Mailing Address:** P.O. BOX 48401 SARASOTA, FL 34230 US FEI Number: 56-2366674 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KOECK, KINDRA M 7110 FAIRWAY BEND LANE #288 SARASOTA, FL 34243 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SKOLROOD, RICK D Name: Name: Address: 7110 FAIRWAY BEND LN., #288 Address: City-St-Zip: SARASOTA, FL 34243 City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: KOECK, KINDRA M Name: Address: 66 MOUND PLACE Address: City-St-Zip: TERRA CEIA, FL 34250 City-St-Zip: Title: () Delete Title: () Change () Addition GREEN, MARK E Name: Name: 3850 MARINER'S WALK, #713 Address: Address: City-St-Zip: CORTEZ, FL 34215 City-St-Zip: Title: ( ) Delete Title: () 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: KINDRA M. KOECK VPD 07/06/2004