2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with

SIGNATURE:

Apr 26, 2004 8:00 am Secretary of State DOCUMENT # N03000005044 04-26-2004 90464 007 ****61.25 URBÁN FLORIDA LEAGUE OF BUSINESS, INC. Principal Place of Business Mailing Address ヘイルスエリ作品 1435 WEST BUSCH BLVD. 1435 WEST BUSCH BLVD. SUITE D SUITE D TAMPA, FL 33612 TAMPA, FL 33612 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04242004 Chg-NP CR2E037 (10/03) Applied For City & State City & State 4. FEI Number 81-0621187 Not Applicable Zip Zip Country Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SNOW: DAVID-III--- -Street Address (P.O. Box Number is Not Acceptable) 1435 W. BUSCH BLVD. SUITE D TAMPA, FL 33612 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to ---- Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE DIR □ Delete TITLE Change Addition MARTIN, BRENDA NAME NAME 2734 36ST AVENUE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BRADENTON, FL 34208 CITY-ST-ZIP DIR ☐ Delete TITLE TITLE Change ☐ Addition BAKER, ANDREW NAME NAME 911 EAST MCBERRY STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33603 CITY-ST-ZIP DIR TITLE Delete TITLE ☐ Change Addition 13 CARLEY, HENRY NAME NAME 7821 NORTH 53RD STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, EL_33617_ _ CITY-ST-ZIP Delete ☐ Addition TITLE TITLE ☐ Change ROBINS, ROBERT U NAME NAME 4206 29TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33610 CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE SNOW, DAVID III NAME NAME 30228 LETTINGWELL CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESLEY CHAPEL, FL 33543 CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify 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 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 be execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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E OF SIGNING OFFICER OR DIRECTOR

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