

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006074

FILED
Apr 29, 2004
Secretary of State**Entity Name:** ORLANDO TRADESHOW & EVENTS ASSOCIATION MEMBERS, INC.**Current Principal Place of Business:**207 ALYDAR CT
ORLANDO, FL 32837**New Principal Place of Business:**7575 KINGSPONTE PARKWAY
SUITE 21
ORLANDO, FL 32819**Current Mailing Address:**207 ALYDAR CT
ORLANDO, FL 32837**New Mailing Address:**7575 KINGSPONTE PARKWAY
SUITE 21
ORLANDO, FL 32819**FEI Number:** 03-0523536**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**HOLMES, CHARLES J
207 ALYDAR CT
ORLANDO, FL 32837**Name and Address of New Registered Agent:**HOLMES, CHARLES J
207 ALYDAR CT
ORLANDO, FL 32824

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: CHARLES J. HOLMES

04/29/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GRIFFIN, CHRIS
Address: 8010 SUNPORT DR STE 123
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: HADDON, RODNEY C
Address: 1006 HANGING VINE PT
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Delete
Name: HOLMES, CHARLES J
Address: 207 ALYDAR CT
City-St-Zip: ORLANDO, FL 32824

Title: D () Delete
Name: KOHIBRAND, STACEY
Address: 11100 ASTRONAUT BLVD
City-St-Zip: ORLANDO, FL 32837

Title: D () Delete
Name: PETERS, DAVID S
Address: 11100 ASTRONAUT BLVD
City-St-Zip: ORLANDO, FL 32837

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLMES, CHARLES J
Address: 207 ALYDAR CT
City-St-Zip: ORLANDO, FL 32824

Title: D (X) Change () Addition
Name: GRIFFIN, CHRIS
Address: 8010 SUNPORT DR STE 123
City-St-Zip: ORLANDO, FL 32809

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HADDON, STACEY
Address: 11100 ASTRONAUT BLVD
City-St-Zip: ORLANDO, FL 32837

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES J. HOLMES

D

04/29/2004

Electronic Signature of Signing Officer or Director

Date