

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006533

FILED
Apr 28, 2004
Secretary of State

Entity Name: CHRISTIAN ROCK RADIO NETWORK, INC.

Current Principal Place of Business:

DAVID S STANTON
307 SAWMILL CREEK CT.
ORMOND BEACH, FL 32174

New Principal Place of Business:

307 SAWMILL CREEK CT.
ORMOND BEACH, FL 32174

Current Mailing Address:

DAVID S STANTON
307 SAWMILL CREEK CT.
ORMOND BEACH, FL 32174

New Mailing Address:

307 SAWMILL CREEK CT.
ORMOND BEACH, FL 32174

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, DAVID S
307 SAWMILL CREEK CT.
ORMOND BEACH, FL 32174 US

Name and Address of New Registered Agent:

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:

Title: DP () Delete
Name: STANTON, DAVID S
Address: 307 SAWMILL CREEK CT.
City-St-Zip: ORMOND BEACH, FL 32174

Title: DVP () Delete
Name: CARTER, DAVID C
Address: 1449 TOMMY HITCHCOCK AVE.
City-St-Zip: DAYTONA BEACH, FL 32124

Title: DS () Delete
Name: CARTER, LARISSA
Address: 1449 TOMMY HITCHCOCK AVE.
City-St-Zip: DAYTONA BEACH, FL 32124

Title: DT () Delete
Name: COOPER, ALLISON J
Address: 100 GARDEN CV.
City-St-Zip: STOCKBRIDGE, GA 30281

Title: D () Delete
Name: PANEK, ROBERT M
Address: 844 ESSEX RD.
City-St-Zip: DAYTONA BEACH, FL 32117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: DT (X) Change () Addition
Name: COOPER, ALLISON J
Address: 105 RACEWAY POINTE DR. #304
City-St-Zip: DAYTONA BEACH, FL 32114

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: DAVID S STANTON

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date