2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007897

City-St-Zip:

PENSACOLA, FL 32507

Entity Name: ESCAMBIA HIGH SCHOOL TIP OFF CLUB, INC.

FILED Apr 20, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1310 N. 65TH AVENUE PENSACOLA, FL 32506 **Current Mailing Address: New Mailing Address:** 1310 N. 65TH AVENUE PENSACOLA, FL 32506 FEI Number: 56-2400789 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: BROWN, STEVE 1310 N. 65TH AVENUE PENSACOLA, FL 32506 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: () Change () Addition () Delete BROWN, STEVE Name: Name: 1310 N. 65TH AVENUE Address: Address: City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: Title: SD Title: SD () Delete (X) Change () Addition Name: KING, TAMMY Name: BANKS, TRACY Address: 8 GAMWELL Address: 70 MORRIS COURT City-St-Zip: PENSACOLA, FL 32506 City-St-Zip: PENSACOLA, FL 32501 Title: () Delete Title: PD (X) Change () Addition ROBINSON, JOHN OVERALL, GEORGE Name: Name: 1901 NICOLE STREET 8174 SEDGEFIELD DRIVE Address: Address: City-St-Zip: PENSACOLA, FL 32507 City-St-Zip: PENSACOLA, FL 32507 Title: TD () Delete Title: () Change () Addition Name: PLOMBON, ROBIN Name: Address: 1147 NAPLES DRIVE Address:

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.

City-St-Zip:

SIGNATURE: STEVE BROWN D 04/20/2004