

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000008620

1. Entity Name  
INTERNATIONAL BIG FISH NETWORK, INC.



**FILED**  
**Apr 19, 2004 8:00 am**  
**Secretary of State**

04-19-2004 90345 028 \*\*\*\*61.25

Principal Place of Business  
2336 SE OCEAN BLVD., #108  
STUART, FL 34996

Mailing Address  
2336 SE OCEAN BLVD., #108  
STUART, FL 34996

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04132004 Chg-NP CR2E037 (10/03)

4. FEI Number

20-0287529

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CRAWFORD, DEAN  
150 BRADLEY PLACE  
#416  
PALM BEACH, FL 33480

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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)

DATE

**Filing Fee is \$61.25**  
**Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME CRAWFORD, DEAN ☐ Delete  
STREET ADDRESS 150 BRADLEY PLACE, #416  
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE S  
NAME CRAWFORD, DEAN ☐ Delete  
STREET ADDRESS 150 BRADLEY PLACE, #416  
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE T  
NAME CRAWFORD, DEAN ☐ Delete  
STREET ADDRESS 150 BRADLEY PLACE, #416  
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE D  
NAME CRAWFORD, DEAN ☐ Delete  
STREET ADDRESS 150 BRADLEY PLACE, #416  
CITY-ST-ZIP PALM BEACH, FL 33480

TITLE D  
NAME FREIHOFFER, DENISE ☐ Delete  
STREET ADDRESS 1518 CYPRESS GLEN  
CITY-ST-ZIP STUART, FL 34997

TITLE D  
NAME RODGERS, TODD ☐ Delete  
STREET ADDRESS 8509 BELLA WAY  
CITY-ST-ZIP TAMPA, FL 33635

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing 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 to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEAN W. CRAWFORD

PRESIDENT

Date

Daytime Phone #

4-16-04 561-651-7204