

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012985

FILED
Apr 25, 2006
Secretary of State

Entity Name: SPACE COAST PUBLIC RADIO, INC.

Current Principal Place of Business:

325 VALENCIA ROAD
WEST MELBOURNE, FL 32904

New Principal Place of Business:

P.O. BOX 100085
PALM BAY, FL 32910

Current Mailing Address:

325 VALENCIA ROAD
WEST MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 20-4032511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, J. PATRICK
930 S. HARBOR CITY BOULEVARD, SUITE 505
MELBOURNE, FL 32901 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: D () Delete
Name: BENNETT, RANDY
Address: 325 VALENCIA ROAD
City-St-Zip: WEST MELBOURNE, FL 32904

Title: D () Delete
Name: JULIAN, JAN
Address: P.O. BOX 100085
City-St-Zip: PALM BAY, FL 32910

Title: D () Delete
Name: BENNETT, LETHA
Address: P.O. BOX 100085
City-St-Zip: PALM BAY, FL 32910

Title: D () Delete
Name: GARNER, BROOKS
Address: P.O. BOX 100085
City-St-Zip: PALM BAY, FL 32910

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: () 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 Chapter 119, 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: LETHA BENNETT

D

04/25/2006

Electronic Signature of Signing Officer or Director

Date