SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.) APPROVED AND FILED FLORIDA DEPARTMENT OF STATE NONPROFIT CORPORATION Sandra B. Mortham ANNUAL REPORT **Secretary of State 1996 SEP -3 PM 12: 38 DIVISION OF CORPORATIONS 1996 SECRETARY OF STATE N95000003164 (9) DOCUMENT # TALLAHASSEE, FLORIDA SPACE COAST SENIOR GAMES, INC. Mailing Address Principal Place of Business 1436 STARBOARD STREET NW 1436 STARBOARD STREET NW PALM BAY FL 32907 PALM BAY FL 32907 3a. Date of Last Report 3. Date Incorporated or Qualified 06/29/1995 Applied For 4. FEI Number 59-Not Applicable \$8.75 Additional Suite, Apt. #, etc Certificate of Status Desired Fee Required 27 \$5.00 May Be 22 Election Campaign Financing Added to Fees Trust Fund Contribution 8. This corporation has liability for intangible tax order s. 199.032, Yes No Florida Statutes 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 HAMILTON, CAROL 82 1436 STARBOARD STREET NW 83 PALM BAY FL 32907 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered trent, or both if the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am families with, applications of Section 617.0503, Florida Statutes. (NOTE Registered Agent signature required when reinstating) SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 400001943924 12. xecutive Director DELETE 1.1 TITLE CR2E037 TITLE -09/11/96--01002--011 1.2 NAME GROL HAMILTON NAME *****61.25 O Richland AVE 1.3 STREET ADDRESS *****61.25 STREET ADDRESS 1.4 CITY - ST - ZIP Addition Change CITY-ST-ZIP 21 TITLE TITLE 2.2 NAME Panama Dri NAME 2.3 STREET ADDRESS Mourne, FL 32934 STREET ADDRESS 2 4 CITY - ST - ZIP Change Addition CITY-ST-ZIP DELETE 3.1 TITLE n. allantie ave., Ste. 301 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS Cocoa Beach, FL 32931 STREET ADDRESS 3.4. CITY - ST-ZIP Change Addition CITY - ST - ZIP DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY-ST-ZIP Change Addition CITY-ST-ZIP DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP Addition Change CITY-ST-ZIP 6.1 TITLE DELETE TITLE 13/91 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an office for 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 12 of Block 13 if changed, or on an attachment with an address. HEED

0004919

SIGNATURE: