

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000078253

FILED
Sep 07, 2005
Secretary of State

Entity Name: RKO MANAGEMENT CORPORATION

Current Principal Place of Business:

1227 SW 55 STREET, SUITE 912
SUITE 912
COOPER CITY, FL 33330

New Principal Place of Business:

12277 SW 55 STREET
SUITE 912
COOPER CITY, FL 33330

Current Mailing Address:

1227 SW 55 STREET, SUITE 912
SUITE 912
COOPER CITY, FL 33330

New Mailing Address:

12277 SW 55 STREET
SUITE 912
COOPER CITY, FL 33330

FEI Number: 65-1031136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OSBORNE, DONNA M
12277 SW 55 ST.
SUITE 912
COOPER CITY, FL 33330 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OSBORNE, DONNA M
Address: 13521 OLD SHERIDAN
City-St-Zip: SOUTH WEST RANCHES, FL 33330

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA M. OSBORNE

PD

09/07/2005

Electronic Signature of Signing Officer or Director

Date