2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2005
Secretary of State

DOCUMENT# P01000013951

Entity Name: COLLEGIATE DEVELOPMENT NETWORK, INC.

Current Principal Place of Business:

4372 OAK VIEW DR.
SARASOTA, FL 34232

New Principal Place of Business:

Current Mailing Address:

4372 OAK VIEW DR.
SARASOTA, FL 34232

New Mailing Address:

FEI Number: 65-1075344 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAIOCCO, SHARON A
4372 OAK VIEW DR.
SARASOTA, FL 34232 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DEWATERS, JAMIE N DR.
Address: 11 ROYAL PARKWAY
City-St-Zip: WILLIAMSVILLE, NY 14221 US

Title: VP/T ( ) Delete
Name: BAIOCCO, SHARON A DR.
Address: 4372 OAK VIEW DRIVE
City-St-Zip: SARASOTA, FL 34232 US

Title: S ( ) Delete
Name: RAGONNET, JAMES L DR.
Address: 2125 WILBRAHAM ROAD
City-St-Zip: SPRINGFIELD, MA 01129 US

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:

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: SHARON A. BAIOCCO VP 03/08/2005

Electronic Signature of Signing Officer or Director — Date