

# **2009 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P01000054935

**FILED**  
**Jan 06, 2009**  
**Secretary of State**

**Entity Name:** AMBASSADOR MEDIA CORPORATION

**Current Principal Place of Business:**

2154 MARINER BLVD.  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

2154 MARINER BLVD.  
SPRING HILL, FL 34609

**New Mailing Address:**

**FEI Number:** 59-3725643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BUTLER, ROXANNE  
2154 MARINER BLVD.  
SPRING HILL, FL 34609 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: PTD ( ) Delete  
Name: LOWRY, SAMUEL  
Address: 5239 FRANCONIA AVE.  
City-St-Zip: SPRING HILL, FL 34606

Title: VP ( ) Delete  
Name: INAFUKU, MICHELLE  
Address: 60 CROSS POINTE  
City-St-Zip: GREENVILLE, SC 29607

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

**SIGNATURE:** SAMUEL LOWRY

PTD

01/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date