

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000022244

FILED
Apr 28, 2005
Secretary of State

Entity Name: SPACE COAST LEGAL VIDEO, INC.

Current Principal Place of Business:

2422 FOREST PARK DRIVE
MELBOURNE, FL 32935 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 360331
MELBOURNE, FL 329360331 US

New Mailing Address:

FEI Number: 56-2317591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLDER, EDUARDO
2422 FOREST PARK DRIVE
MELBOURNE, FL 32935 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: HOLDER, EDUARDO
Address: 2422 FOREST PARK DRIVE
City-St-Zip: MELBOURNE, FL 32935 US

Title: VPT () Delete
Name: HOLDER, CASSANDRA N
Address: 2422 FOREST PARK DRIVE
City-St-Zip: MELBOURNE, FL 32935 US

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 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: CASSANDRA HOLDER

VPT

04/28/2005

Electronic Signature of Signing Officer or Director

Date