

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000037991

Entity Name: FISKE MEDIA, INC.

FILED  
Apr 25, 2006  
Secretary of State

## Current Principal Place of Business:

2990 FISKE BLVD  
ROCKLEDGE, FL 32955

## New Principal Place of Business:

2990 FISKE BLVD  
OFFICE  
ROCKLEDGE, FL 32955

## Current Mailing Address:

2990 FISKE BLVD  
ROCKLEDGE, FL 32955

## New Mailing Address:

2990 FISKE BLVD  
OFFICE  
ROCKLEDGE, FL 32955

FEI Number: 04-3785964

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WALSER, WILHELM A  
2990 S. FISKE BLVD.  
ROCKLEDGE, FL 32955 US

## Name and Address of New Registered Agent:

WALSER, WILHELM A  
2990 S. FISKE BLVD.  
D-1  
ROCKLEDGE, FL 32955 US

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: WILHELM WALSER

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GRAU, JUERG  
Address: 2990 FISKE BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: DVS ( ) Delete  
Name: WALSER, WILHELM  
Address: 2990 FISKE BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: T ( ) Delete  
Name: STERCHI, MICHAEL  
Address: 2990 FISKE BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete  
Name: GRAU, YVONNE  
Address: 2990 FISKE BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S ( ) Change (X) Addition  
Name: WALSER, OLIVER W  
Address: 2990 S. FISKE BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

I hereby certify that the information supplied with this filing does not qualify for the 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: WILHELM WALSER

DVS

04/25/2006

Electronic Signature of Signing Officer or Director

Date