

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000019083

Entity Name: PRIME TIME VENTURES, INC.

FILED  
Apr 02, 2008  
Secretary of State

## Current Principal Place of Business:

1900 S. HARBOR CITY BLVD  
SUITE 225  
MELBOURNE, FL 32901

## New Principal Place of Business:

## Current Mailing Address:

P. O. BOX 1783  
MELBOURNE, FL 32901

## New Mailing Address:

FEI Number: 20-8424856

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BANKS, VALERIAN L  
704 E. BROTHERS AVENUE  
MELBOURNE, FL 32901 US

## Name and Address of New Registered Agent:

BANKS, VAN W  
1900 S. HARBOR CITY BLVD  
SUITE 225  
MELBOURNE, FL 32901 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: VAN W. BANKS

04/02/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: JOHNSON, SCHRALTON L  
Address: P.O. BOX 533476  
City-St-Zip: ORLANDO, FL 32801

Title: VP ( ) Delete  
Name: BANKS, VALERIAN L  
Address: P. O. BOX 1103  
City-St-Zip: MELBOURNE, FL 32902

Title: S ( ) Delete  
Name: BANKS, MARY E  
Address: POST OFFICE BOX 1046  
City-St-Zip: MELBOURNE, FL 32902

Title: T ( ) Delete  
Name: BANKS, VAN W  
Address: POST OFFICE BOX 1046  
City-St-Zip: MELBOURNE, FL 32902

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition  
Name: BANKS, VAN W  
Address: P.O. BOX 1046  
City-St-Zip: MELBOURNE, FL 32902

Title: VP/D (X) Change ( ) Addition  
Name: BANKS, VALERIAN L  
Address: P. O. BOX 1783  
City-St-Zip: MELBOURNE, FL 32902

Title: S/D (X) Change ( ) Addition  
Name: BANKS, MARY E  
Address: POST OFFICE BOX 1046  
City-St-Zip: MELBOURNE, FL 32902

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

Title: D ( ) Change (X) Addition  
Name: JOHNSON, SCHRALTON L  
Address: P.O. BOX 533476  
City-St-Zip: ORLANDO, FL 32801

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: VALERIAN L. BANKS

VP/D

04/02/2008

Electronic Signature of Signing Officer or Director

Date