## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000024668

Principal Place of Business

FLORIDA SPORTS NETWORK OF VENICE, INC.

1608 MAPLE STREET NOKOMIS FL 34275		1608 MAPLE STREET NOKOMIS FL 34275					
US US				DO NOT WRITE IN THIS SPACE			
					3. Date incorporated or Qualifed 03/28/1994		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Ar	plied For
21		26	26		65-0475167	No	t Applicable
Suite, Apt.	#. etc.		Suite, Apt. #, etc.		_	\$8.75	Additional
22			27		5. Certifcate of Status Desired	Fee Re	equired
City & State			City & State		6. Election Campaign Financing	\$5.00	May Be
23		<b>⊢</b> •	28		Trust Fund Contribution	Added	
Zip	Country	Zip	Countr		8. This corporation owes the current year In		
	25 29		30		Personal Property Tax.	10 Yes	□No
24	9. Name and Address of Cur		30]		10. Name and Address of New Registered		
	9. Name and Address of Cu	Halit Kağıstarad Ağanı	8	1 Name -	To, reduce and processors in the language	7182	
GFR	TSCH, FRED W						
1608 MAPLE ST			83	2 Street Add	iress (P.O. Box Number is Not Acceptable)		
NOKOMIS FL 34275			ļ		<del>.</del>		
1101	OMIO 1 E 042/3		8:	3			
			84	4 City		85 Zip	Code
	•			1 -	F <u>I</u>		
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Florida Statute	s, the abo	ve-named con	poration submits this statement for the purpose of ion's board of directors. I hereby accept the appo	f changing its	registered
onice or r	egistered agent, or both, in the St m familiar with <u>and ecce</u> pt the ob	ate of Florida. Such change was audigations of, Section 607.0505. Flori	da Statute	y me corporati s.	ion's board of directors. Thereby accept the appo	AIIIIIIIIII GG TG	giotorou
•	T-01	1. Auta	<b></b>		4-7-99		(
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOTE: I	Registered Age	ent signature requir	red when reinstating) DATE		
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1.1 TITLE	_		☐ Change	☐ Addition
NAME	GERTSCH, FRED W	ERTSCH, FRED W		:			
STREET ADDRESS	1608 MAPLE ST		1.3 STREI	ET ADDRESS			ĺ
CITY-ST-ZIP	NOKOMIS FL 34275		1.4 CITY-				
TITLE			2.1 TITLE			Change	☐ Addition }
NAME			2.2 NAME				
	1608 MAPLE ST			ET ADDRESS			j
STREET ADDRESS	NOKOMIS FL 34275		3	ì			Ī
CITY-ST-ZIP	NOROMIS FL 342/3		2. 4 CITY-			Change	Addition
TITLE		□ DECE IE	3.1 TITLE			☐ 3.14.1.8¢	ا العسادة .
NAME			3.2 NAME		The same of the sa	e -J.	
STREET ADDRESS	The state of the		1	ET ADORESS	• • • • • • • • • • • • • • • • • • • •		1
CITY-\$T-ZIP			3.4. CITY-				- Addition
TITLE		☐ DELETE	4,1 TITLE			Change	☐ Addition
NAME			4. 2 NAME	Ε			Į
STREET ADDRESS			4.3 STREI	ET ADDRESS			
CITY-ST-ZIP			4.4 C/TY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition }
NAME			5.2 NAME	:		•	
STREET ADDRESS	•		5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME	: 1			
	]		6.3 STREE	ET ADORESS			
STREET ADDRESS							

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90053 018 \*\*\*150.00