2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000006521

824 S ORLEANS AVE

TAMPA, FL 33609

Address City-St-Zip:

FILED Apr 27, 2005 Secretary of State

Entity Name: CHANNELSIDE, INC. **Current Principal Place of Business: New Principal Place of Business:** 807 E EUNICE AVE 807 E EUNICE AVE TAMPA, FL 33606 US TAMPA, FL 33602 US **Current Mailing Address: New Mailing Address:** PO BOX 152516 TAMPA, FL 33684 US FEI Number: 59-3418357 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TEAR, W. GREGORY TEAR, W. GREGORY PO BÓX 152516 PO BÓX 152516 8530 N NEWPORT AVE 8530 N NEWPORT AVE TAMPA, FL 33604 US TAMPA, FL 33684 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: 04/27/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BURNS, KEVIN J Name: Name: 4508 BROOKWOOD DRIVE Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: TEAR, W. GREGORY Name: TEAR, W. GREGORY 8530 N NEWPORT AVE 8530 N NEWPORT AVE Address: Address: TAMPA, FL 33609 TAMPA, FL 33604 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition SCARRITT, THOMAS P Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: W. GREGORY TEAR 04/27/2005 Τ