

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000006521

Entity Name: CHANNELSIDE, INC.

FILED
Mar 21, 2006
Secretary of State

Current Principal Place of Business:

807 E EUNICE AVE
TAMPA, FL 33602 US

New Principal Place of Business:

1509 W. SWANN AVE.
SUITE 280
TAMPA, FL 33606 US

Current Mailing Address:

PO BOX 152516
TAMPA, FL 33684 US

New Mailing Address:

1509 W. SWANN AVE.
SUITE 280
TAMPA, FL 33606 US

FEI Number: 59-3418357

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEAR, W. GREGORY
PO BOX 152516
8530 N NEWPORT AVE
TAMPA, FL 33684 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: PD () Delete
Name: BURNS, KEVIN J
Address: 4508 BROOKWOOD DRIVE
City-St-Zip: TAMPA, FL 33629

Title: TD () Delete
Name: TEAR, W. GREGORY
Address: 8530 N NEWPORT AVE
City-St-Zip: TAMPA, FL 33604

Title: SD () Delete
Name: SCARRITT, THOMAS P JR.
Address: 824 S ORLEANS AVE
City-St-Zip: TAMPA, FL 33609

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:

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: THOMAS SCARRITT

SD

03/21/2006

Electronic Signature of Signing Officer or Director

Date