

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000006521

Entity Name: CHANNELSIDE, INC.

FILED  
Jan 27, 2008  
Secretary of State

## Current Principal Place of Business:

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

## New Principal Place of Business:

1405 W. SWANN AVE.  
TAMPA, FL 33606 US

## Current Mailing Address:

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

## New Mailing Address:

1405 W. SWANN AVE.  
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  
8530 N NEWPORT AVE  
TAMPA, FL 33604 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: SD (X) Change ( ) Addition  
Name: SCARRITT, THOMAS P JR.  
Address: 1405 W. SWANN AVE.  
City-St-Zip: TAMPA, FL 33606

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: THOMAS SCARRITT

D

01/27/2008

Electronic Signature of Signing Officer or Director

Date