2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000006521

Entity Name: CHANNELSIDE, INC.

FILED Mar 09, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
1405 W. S TAMPA, F	SWANN AVE. IL 33606 US	5			
Current Mailing Address:			New Mailing Address:		
1405 W. S TAMPA, F	SWANN AVE. °L 33606 US	3			
FEI Number	: 59-3418357	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	Current Registered Agent:	Name and Address of	of New Registered Agent:	
	GREGORY EWPORT AVE EL 33604 US	6			
	e named entity : e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Age			jent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () BURNS, KEVIN 4508 BROOKW TAMPA, FL 33	OOD DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () TEAR, W. GRE 8530 N NEWPO TAMPA, FL 33	ORT AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SD () SCARRITT, TH) Delete	Title: Name:	() Change () Addition	

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 SD 03/09/2009