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May 20 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V47350** **(6)**

1. Corporation Name
SPACE COAST ADVERTISING CONSORTIUM, INC.

Principal Place of Business	Mailing Address
1300 ARMSTRONG DR STE 101 TITUSVILLE FL 32780 US	1300 ARMSTRONG DR STE 101 TITUSVILLE FL 32780-7930 US

3. Date Incorporated or Qualified: 06/26/1992
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 1416 Chaffee Dr.
Suite, Apt. #, etc. 22
City & State 23 Titusville, FL
Zip 24 32780 Country 25 USA

2a. Mailing Address
26 1416 Chaffee Dr.
Suite, Apt. #, etc. 27
City & State 28 Titusville, FL
Zip 29 32780 Country 30 USA

4. FEI Number: 59-3131816 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ELLIS, WENDY
1300 ARMSTRONG DR
SUITE 101
TITUSVILLE FL 32780

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 1416 Chaffee Dr.
83
84 City Titusville, FL 85 Zip Code 32780

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE
Signature, typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1,1 TITLE		☐ Change ☐ Addition
NAME	ELLIS, WENDY		1,2 NAME		
STREET ADDRESS	1300 ARMSTRONG DR #101		1,3 STREET ADDRESS	1416 Chaffee Dr.	
CITY-ST-ZIP	TITUSVILLE FL		1,4 CITY-ST-ZIP	Titusville, FL 32780	
TITLE	DST	☐ DELETE	2,1 TITLE		☐ Change ☐ Addition
NAME	PATCH, PATRICIA A.		2,2 NAME		
STREET ADDRESS	1300 ARMSTRONG DR #101		2,3 STREET ADDRESS	1416 Chaffee Dr.	
CITY-ST-ZIP	TITUSVILLE FL		2,4 CITY-ST-ZIP	Titusville, FL 32780	
TITLE		☐ DELETE	3,1 TITLE		☐ Change ☐ Addition
NAME			3,2 NAME		
STREET ADDRESS			3,3 STREET ADDRESS		
CITY-ST-ZIP			3,4 CITY-ST-ZIP		
TITLE		☐ DELETE	4,1 TITLE		☐ Change ☐ Addition
NAME			4,2 NAME		
STREET ADDRESS			4,3 STREET ADDRESS		
CITY-ST-ZIP			4,4 CITY-ST-ZIP		
TITLE		☐ DELETE	5,1 TITLE		☐ Change ☐ Addition
NAME			5,2 NAME		
STREET ADDRESS			5,3 STREET ADDRESS		
CITY-ST-ZIP			5,4 CITY-ST-ZIP		
TITLE		☐ DELETE	6,1 TITLE		☐ Change ☐ Addition
NAME			6,2 NAME		
STREET ADDRESS			6,3 STREET ADDRESS		
CITY-ST-ZIP			6,4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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.

SIGNATURE: (SIGNATURE REQUIRED)