SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **FILED PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Aug 06 1996 8:00am Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS Secretary of State **DOCUMENT** # V63736 (5)SPORTS MARKETING, INC. Principal Place of Business Mailing Address 8201 & TAMIÁMI TRAIL 8201 STAMJAMI TRAIL SAMASOTA, FL 34238 SARASOTA TL 34238 3. Date Incorporated or Qualified 3a. Date of Last Report <u>10/01/1992</u> 05/01/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For My Brendon 65-0365971 Not Applicable \$8.75 Additional 5. Certificate of Status Desired enter 27 Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country U:S 8. This corporation has liability for intangible tax under s. 199,032. 29 30 Yes No Florida Statutes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MARTIN, MARY M 608 WEST VENICE AVENUE 82 Box Number is Not Acceptable) VENICE FL 34285 83 84 Brandon the provisions of Sections 607.0502 and 307.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 familiar with, and accept the obligation of, Section 807.0505, Florida Statutes. 11. Pursuant t gistered agent, or both, in the State of 5-10-96 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (36/6) DELETE TITLE 1.1 TITLE Change Addition NAME MARTIN, MARY M 1.2 NAME **608 VENICE AVENUE WEST** STREET ADDRESS 1.3 STREET ADDRESS **VENICE FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition David H. Smith NAME 2.2 NAME STREET ADDRESS Brandon Town Center Mall 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3 1 THUE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP TITLE DELFTE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELE TE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY- ST-2IP TITLE DELETE 6.1 THLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 DITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 an an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of an attachment with an address.

SIGNATURE:

5-10-96 813-651-989