2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 695599

FILED Jan 06, 2006 Secretary of State

Entity Name: NATIONAL YELLOW PAGES DIRECTORY SERVICE, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2000 W BA	AV DDIVE				
LARGO, F		JS			
LANCO, I	L 33770 (50			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2000 W BA	Y DRIVE				
LARGO, F	L 33770 l	JS			
FEI Number:	59-2348970	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	of New Registered Agent:	
BLUMBER	G IOFI				
	BREEZE TE	RRACE			
LARGO, F		JS .			
	named entity e of Florida.	y submits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI					
	Electro	onic Signature of Registered Ager	nt	Date	
Election Car	npaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	PST () Delete	Title:	() Change () Addition	
Name:	BLUMBERG,	JOEL,	Name:		
Address:		EEZE TERRACE	Address:		
City-St-Zip:	LARGO, FL	33770	City-St-Zip:		
Title:	C) Delete	Title:	() Change () Addition	
Name:	BLUMBERG,		Name:		
Address:		EEZE TERRACE	Address:		
City-St-Zip:	LARGO, FL	33770	City-St-Zip:		
Title:	D () Delete	Title:	() Change () Addition	
Name:	WITTLEDER,	ROBYN,	Name:		
Address:	12708 STAN\	VYCK CIR	Address:		
City-St-Zip:	TAMPA, FL 3	3626	City-St-Zip:		
Title:	D () Delete	Title:	() Change () Addition	
Name:	BLUMBERG,		Name:		
Address:	1381 WILLIA		Address:		
City-St-Zip:	CLEARWATE	R, FL 33764	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: ROBYN WITTLEDER D 01/06/2006