

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001500

Entity Name: PROXIX SOLUTIONS, INC.

FILED
Feb 03, 2006
Secretary of State

Current Principal Place of Business:

3202 PALM HARBOR BLVD
SUITE A
PALM HARBOR, FL 34683 US

New Principal Place of Business:

Current Mailing Address:

3202 PALM HARBOR BLVD
SUITE A
PALM HARBOR, FL 34683 US

New Mailing Address:

FEI Number: 36-4523554 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: CP () Delete
Name: WRAY, PAUL
Address: 1410 WILLOW BROOK DR
City-St-Zip: PALM HAROBR, FL 34683

Title: D () Delete
Name: FOUST, BRADY
Address: 3504 DAMON ST.
City-St-Zip: EAU CLAIRE, WI 54701

Title: D () Delete
Name: GOLDSTEIN, JOSHUA
Address: 290 KIOWA PLACE
City-St-Zip: BOULDER, CO 80303

Title: ST () Delete
Name: LITTLE, MARCIA
Address: 2544 STILLWATER CT
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: REBHAN, GEORGE
Address: 8528 WATERFORD WAY
City-St-Zip: LONGMONT, CO 80503

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: VANDERHOOF, ALISON
Address: C/O PROXIX 3202 PALM HARBOR BLVD, STE A
City-St-Zip: PALM HARBOR, FL 34683

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: MARCIA W LITTLE

ST

02/03/2006

Electronic Signature of Signing Officer or Director

_____ Date