## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000006261

Entity Name: SORENSON COMMUNICATIONS, INC.

FILED Apr 14, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
SUITE 300				4393 SOUTH RIVERBOAT RD. SUITE 300 SALT LAKE CITY, UT 84123			
Current Mailing Address:				New Mailing Address:			
4393 RIVERBOAT ROAD SUITE 300 SALT LAKE CITY, UT 84123			4393 SOUTH RIVERBOAT RD. SUITE 300 SALT LAKE CITY, UT 84123				
FEI Number:	87-0650555	FEI Number Applied For ( )	El Num	nber Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US							
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:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	NOLA, PATRICK	Delete EST TEMPLE STREET (, UT 84115		Title: Name: Address: City-St-Zip:	NOLA, PATRICK	/ERBOAT RD. SUITE 300	
Title: Name: Address: City-St-Zip:	STEINER, REED	Delete T ROAD SUITE 300 123		Title: Name: Address: City-St-Zip:	STEINER, REED	/ERBOAT RD. SUITE 300	
Title: Name: Address: City-St-Zip:	ANDERSON, MA	ST TEMPLE STREET		Title: Name: Address: City-St-Zip:	ANDERSON, MA	/ERBOAT RD. SUITE 300	
Title: Name: Address: City-St-Zip:	TRUJILLO, DAVI	ST TEMPLE STREET		Title: Name: Address: City-St-Zip:	TRUJILLO, DAVI	/ERBOAT RD. SUITE 300	
Title: Name: Address: City-St-Zip:	1()	Delete		Title: Name: Address: City-St-Zip:	CANFIELD, PHIL	/ERBOAT RD. SUITE 300	
Title: Name: Address: City-St-Zip:	1 ( )	Delete		Title: Name: Address: City-St-Zip:	BARSON, JANIC	/ERBOAT RD. SUITE 300	

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: NOLA, PATRICK PD 04/14/2007