

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000001

Entity Name: REVOLUTION MONEY INC.

FILED
Feb 19, 2009
Secretary of State

Current Principal Place of Business:

200 CENTRAL AVE
11TH FLOOR
ST. PETERSBURG, FL 33701

New Principal Place of Business:

Current Mailing Address:

200 CENTRAL AVE
11TH FLOOR
ST. PETERSBURG, FL 33701

New Mailing Address:

FEI Number: 20-2749131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PD () Delete
Name: HOGG, JASON J
Address: 200 CENTRAL AVE 19TH FLOOR
City-St-Zip: ST PETERSBURG, FL 33701

Title: V () Delete
Name: CUMMINGS, DAX
Address: 200 CENTRAL AVE 19TH FLOOR
City-St-Zip: ST PETERSBURG, FL 33701

Title: S () Delete
Name: JOHNS, NICHOLAS P
Address: 200 CENTRAL AVE 19TH FLOOR
City-St-Zip: ST PETERSBURG, FL 33701

Title: T () Delete
Name: THOMPSON, DARREN
Address: 200 CENTRAL AVE 19TH FLOOR
City-St-Zip: ST PETERSBURG, FL 33701

Title: D () Delete
Name: CASE, STEPHEN
Address: 1717 RHODE ISLAND AVE NW 10TH FLOOR
City-St-Zip: WASHINGTON, DC 20036

Title: D () Delete
Name: LEOUSIS, TED
Address: 1717 RHODE ISLAND AVE NW 10TH FLOOR
City-St-Zip: WASHINGTON, DC 20036

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

I hereby certify that the information supplied with this filing does not qualify 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: /S/ DARREN THOMPSON

CFO

02/19/2009

Electronic Signature of Signing Officer or Director

Date