

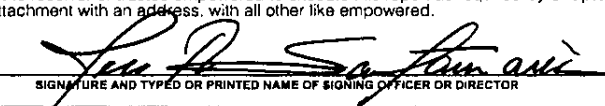


**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2008 08:00 AM
Secretary of State

DOCUMENT # N02000007347			
1. Entity Name WE THE PEOPLE UNITED, INC.			
Principal Place of Business 675 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411		Mailing Address 675 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411	
DO NOT WRITE IN THIS SPACE			
		01042008 No Chg-NP CR2E037 (4/06)	
		4. FEI Number 52-2384621	
		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SANTAMARIA, JESS R 675 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411		DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		U00000886302 04/18/08-80050-002 183.75	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DPT SANTAMARIA, JESS R 675 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		D NIELSEN, RICHARD D 152 KAPOK CRESCENT ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		D SANTAMARIA, CHRISTOPHER 675 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Date _____ Daytime Phone # _____	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			