2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000066163

Entity Name: KAMEDDATA.COM, INC.

FILED Feb 03, 2005 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|---|---|
| 17 WEST CEDAR STREET STE 3 STE 1 PENSACOLA, FL 32501 | 17 WEST CEDAR STREET STE 1 PENSACOLA, FL 32502 |
| Current Mailing Address: | New Mailing Address: |
| 17 WEST CEDAR STREET STE 3 STE 1 PENSACOLA, FL 32501 | 17 WEST CEDAR STREET STE 1 PENSACOLA, FL 32502 |
| FEI Number: 06-1629312 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: |
| NICKELSON, ERIC J 17 WEST CEDAR STREET, SUITE 3 PENSACOLA, FL 32502 US | |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, | |

Election Campaign Financing Trust Fund Contribution ().

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

316 S. BAYLEN

PENSACOLA, FL 32502

in the State of Florida.

SIGNATURE:

Address: City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

() Change () Addition Title: () Delete Title: NICKELSEN, ERIC J Name: Name: 17 WEST CEDAR ST., SUITE 3 Address: Address: City-St-Zip: PENSACOLA, FL 32502 City-St-Zip: Title: () Delete Title: (X) Change () Addition ANDERSON, NIELS Name: Name: ANDERSEN, NIELS Address: Address: 7 WEST CEDAR ST., SUITE 1 7 WEST CEDAR ST., SUITE 1 PENSACOLA, FL 32502 PENSACOLA, FL 32502 City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change () Addition O'SULLIVAN, J. MART Name: O'SULLIVAN, J. MORT Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

316 S. BAYLEN

PENSACOLA, FL 32502

SIGNATURE: NIELS ANDERSEN P 02/03/2005