

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000159821

FILED
Apr 24, 2006
Secretary of State

Entity Name: RETURN PERFORMANCE, INC.

Current Principal Place of Business:

107 15TH ST
BELLEAIR BEACH, FL 33786

New Principal Place of Business:

Current Mailing Address:

107 15TH ST
BELLEAIR BEACH, FL 33786

New Mailing Address:

FEI Number: 20-1930925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, HAROLD D
107 15TH ST
BELLEAIR BEACH, FL 33786 US

Name and Address of New Registered Agent:

ADAMS, HAROLD D
12047 ORANGE BLOSSOM DR.
SEMINOLE, FL 33772 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: HAROLD D ADAMS

04/24/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ADAMS, HAROLD D
Address: 107 15TH ST
City-St-Zip: BELLEAIR BEACH, FL 33786

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ADAMS, HAROLD D
Address: 12047 ORANGE BLOSSOM DR.
City-St-Zip: SEMINOLE, FL 33772

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: HAROLD D ADAMS

PRES

04/24/2006

Electronic Signature of Signing Officer or Director

Date