

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000144351

FILED  
Jul 27, 2006  
Secretary of State

Entity Name: COMMGUIDE INTERNATIONAL, INC.

## Current Principal Place of Business:

13014 NORTH DALE MABRY  
#113  
TAMPA, FL 33618 US

## New Principal Place of Business:

## Current Mailing Address:

13014 NORTH DALE MABRY  
#113  
TAMPA, FL 33618 US

## New Mailing Address:

FEI Number: 20-3880473      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BROWN, ANTHONY R  
13014 NORTH DALE MABRY  
#113  
TAMPA, FL 33618 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BROWN, ANTHONY R  
Address: 13014 NORTH DALE MABRY, #1113  
City-St-Zip: TAMPA, FL 33618 US

Title: VP ( ) Delete  
Name: SCOTT, DOUG  
Address: 4420 SUGAR CREEK LANE  
City-St-Zip: CUMMING, GA 30041 US

Title: CFO ( ) Delete  
Name: CRAIG, KEN  
Address: 39 CAROLINE LANE  
City-St-Zip: PISGAH FOREST, NC 28768

Title: DIR ( ) Delete  
Name: BROWN, ANTHONY R  
Address: 13014 NORTH DALE MABRY, #1113  
City-St-Zip: TAMPA, FL 33618 US

Title: DIR ( ) Delete  
Name: SCOTT, DOUG  
Address: 4420 SUGAR CREEK LANE  
City-St-Zip: CUMMING, GA 30041 US

Title: DIR ( ) Delete  
Name: CRAIG, KEN  
Address: 39 CAROLINE LANE  
City-St-Zip: PISGAH FOREST, NC 28768 US

## 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 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: KEN CRAIG

DIR

07/27/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date