2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000037296

Entity Name: STRATEGIC CROSSING CORPORATION

FILED Apr 17, 2007 Secretary of State

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Current P	rincipal Place	of Business:	New Princ	cipal Place of Business:	
SUITE 3	CEDAR STREE	ΞΤ			
	ailing Addres		Now Maili	ing Addrage:	
Current W	alling Addres	>.	New Main	ing Address:	
PO BOX 1 PENSACC	2725 DLA, FL 32501				
FEI Number	: 59-3507139	FEI Number Applied For ()	FEI Number Not Appl	Olicable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
	N, ALAN B I SPRING STR DLA, FL 32501	EET US			
	named entity s e of Florida.	ubmits this statement for the pu	rpose of changing i	its registered office or registered agent, or bo	oth,
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ager	nt	Date	_
Election Car	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () SPENCER, BRIA 17 E. MAIN ST, PENSACOLA, F	SUITE 100	Title: Name: Address: City-St-Zip:	DVST (X) Change () Addition SPENCER, BRIAN K 17 E. MAIN ST, SUITE 100 PENSACOLA, FL 32501	
Title: Name: Address: City-St-Zip:	NASH, NEAL B	Delete STREET SUITE 260 L 32505	Title: Name: Address: City-St-Zip:	DP (X) Change () Addition NASH, NEAL B 120 EAST MAIN STREET, SUITE A PENSACOLA, FL 32502	
Title: Name: Address: City-St-Zip:	CARR, JOHN S	Delete TREET SUITE 3 L 32501	Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition CARR, JOHN S 17 W CEDAR STREET, SUITE 3 PENSACOLA, FL 32502	
Title: Name: Address: City-St-Zip:	D () NICKELSEN, EF 3410 NORTH 18 PENSACOLA, F	STH AVENUE	Title: Name: Address: City-St-Zip:	DVP (X) Change () Addition NICKELSEN, ERIC J 17 WEST CEDAR STREET, SUITE 3 PENSACOLA, FL 32502	
Title: Name: Address: City-St-Zip:	CHADBOURNE,	R STREET SUITE 3	Title: Name: Address: City-St-7in:	D (X) Change () Addition CHADBOURNE, EDWARD M 17 WEST CEDAR STREET SUITE 3 PENSACOLA FL 32502	

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: JOHN S. CARR VP 04/17/2007