

**2015 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P13000082498

**Entity Name:** DOTAUTHORITY.COM, INC.

**Current Principal Place of Business:**

515 E LAS OLAS BOULEVARD  
SUITE 120  
FT. LAUDERDALE, FL 33301

**Current Mailing Address:**

PO BOX 480340  
FT. LAUDERDALE, FL 33348 US

**FEI Number: 35-2496187**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

INCorp SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            LAMB, JAMES P  
Address        515 E LAS OLAS BOULEVARD  
                  SUITE 120  
City-State-Zip: FT LAUDERDALE FL 33301

Title            SEC  
Name            LAMB, JAMES P  
Address        515 E LAS OLAS BOULEVARD  
                  SUITE 120  
City-State-Zip: FT LAUDERDALE FL 33301

Title            TRES  
Name            LAMB, JAMES P  
Address        515 E LAS OLAS BOULEVARD  
                  SUITE 120  
City-State-Zip: FT LAUDERDALE FL 33301

Title            DIR  
Name            LAMB, JAMES P  
Address        515 E LAS OLAS BOULEVARD  
                  SUITE 120  
City-State-Zip: FT LAUDERDALE FL 33301

*I hereby 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 all other like empowered.*

**SIGNATURE: JAMES LAMB**

**PRESIDENT**

**03/16/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date