2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 463199

Entity Name: GLOBAL RESPONSE CORPORATION

FILED Jan 11, 2006 Secretary of State

	iidi Olob/(L	THEOR OFFICE CONTROLL			
Current Principal Place of Business:			New Principal Place of Business:		
	H STATE ROA E, FL 33068	AD 7 US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	H STATE ROA E, FL 33068	AD 7 US			
FEI Number:	59-1554822	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
777 S STA	ER, FRANK MA TE RD 7 E, FL 33068	ALLORY US			
	named entity : e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
	Electror	nic Signature of Registered Age	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	S () SHOOSTER, FI 777 SOUTH ST MARGATE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COO () SHOOSTER, M 777 SOUTH ST MARGATE, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () SHOOSTER, S' 777 SOUTH ST MARGATE, FL	ATE ROAD 7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	CEO () SHOOSTER, H 777 SOUTH ST MARGATE, FL	ATE ROAD 7	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	V ()) Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MICHAEL SHOOSTER COO 01/11/2006

LEUCHTER, WENDY,

MARGATE, FL 33068,

777 SOUTH STATE ROAD 7

Name:

Address:

City-St-Zip: