2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2007
Secretary of State

DOCUMENT# 570022

Entity Name: IVANHOE BROADCAST NEWS, INC.

Current Principal Place of Business:

2745 W FAIRBANKS AVE
WINTER PARK, FL 32789 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 865
ORLANDO, FL 32802 US

New Mailing Address:

FEI Number: 59-1858965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, MARJORIE B
2745 W FAIRBANKS AVE
WINTER PARK, FL 32789 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	THOMAS, MARJORIE BEK, AERT	
Address:	242 CHASE AVE	
City-St-Zip:	WINTER PARK, FL	
Title:	D	( ) Delete
Name:	BON FLEUR, BETTE	
Address:	2745 W. FAIRBANKS AVE.	
City-St-Zip:	WINTER PARK, FL 32789	
Title:	VP	( ) Delete
Name:	GROVES, KIMBERLY L	
Address:	1076 ORANGE AVENUE	
City-St-Zip:	WINTER SPRINGS, FL 32708 US	
Title:	VP	( ) Delete
Name:	CHERRY, JOHN	
Address:	1104 CLINGING VINE PLACE	
City-St-Zip:	WINTER SPRINGS, FL 32708 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:	

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: KIMBERLY L GROVES V.P 04/24/2007

Electronic Signature of Signing Officer or Director — Date