

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005875

Entity Name: PRIORITY NETWORKS, INC.

FILED
Feb 17, 2006
Secretary of State

Current Principal Place of Business:

1856 PAMA LANE
#B-1
LAS VEGAS, NV 89119

New Principal Place of Business:

Current Mailing Address:

7721 SETTLERS AVE
BOISE, ID 83704

New Mailing Address:

FEI Number: 82-0512202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCD () Delete
Name: FUNK, TERRY
Address: 12876 FIDDLELEAF
City-St-Zip: BOISE, ID 83713

Title: VSD () Delete
Name: JONES, BEN
Address: 348 KENYA ROAD
City-St-Zip: LAS VEGAS, NV 89119

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POIRIER, DAN
Address: 1856 PAMA LANE #B-1
City-St-Zip: LAS VEGAS, NV 89119

Title: T (X) Change () Addition
Name: FUNK, TERRY
Address: 1856 PAMA LANE #B-1
City-St-Zip: LAS VEGAS, NV 89119

Title: S () Change (X) Addition
Name: JONES, BEN
Address: 1856 PAMA LANE #B-1
City-St-Zip: LAS VEGAS, NV 89119

Title: D () Change (X) Addition
Name: FUNK, TERRY
Address: 1856 PAMA LANE #B-1
City-St-Zip: LAS VEGAS, NV 89119

Title: D () Change (X) Addition
Name: JONES, BEN
Address: 1856 PAMA LANE #B-1
City-St-Zip: LAS VEGAS, NV 89119

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: BEN JONES

SEC

02/17/2006

Electronic Signature of Signing Officer or Director

Date