

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007235

FILED  
Jan 17, 2008  
Secretary of State

Entity Name: CYBRCOLLECT, INC.

**Current Principal Place of Business:**

2350 SOUTH AVENUE  
SUITE 105  
LA CROSSE, WI 54601

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 1145  
LA CROSSE, WI 546021145

**New Mailing Address:**

FEI Number: 39-1942543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: DOHERTY, GARY M  
Address: N1948 HICKORY LANE  
City-St-Zip: LA CROSSE, WI 54601 US

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

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: MONROE, KATHY L  
Address: 2350 SOUTH AVE #105  
City-St-Zip: LA CROSSE, WI 54601 US

Title: VP ( ) Change (X) Addition  
Name: VALACHOVIC, STEPHEN J  
Address: 4200 REGENT ST. #200  
City-St-Zip: COLUMBUS, OH 43212 US

Title: SEC ( ) Change (X) Addition  
Name: CULLEN, JOHN M  
Address: 4200 REGENT ST. #200  
City-St-Zip: COLUMBUS, OH 43212 US

I hereby certify that the information supplied with this filing does not qualify 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: KATHY L. MONROE

CEO

01/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date