2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000081

RICHARD, BRIGGS A

INDIANAPOLIS, IN 46290

201 WEST 103RD STREET SUITE 420

Name:

Address:

City-St-Zip:

Entity Name: PROFESSIONAL DATA MANAGEMENT AGAIN, INC.

FILED Jan 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 201 WEST 103RD ST 201 WEST 103RD STREET SUITE 420 SUITE 420 INDIANAPOLIS, IN 46290 INDIANAPOLIS, IN 46290 **Current Mailing Address: New Mailing Address:** 201 WEST 103RD STREET SUITE 420 INDIANAPOLIS, IN 46290 FEI Number: 35-2126362 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DRIVE - SUITE 4 WESTON, FL 33331 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition WAGNER, TIMOTHY L Name: Name: 201 WEST 103RD STREET SUITE 420 Address: Address: City-St-Zip: INDIANAPOLIS, IN 46290 City-St-Zip: Title: CD () Delete Title: () Change () Addition Name: WAGNER, TIMOTHY L Name: 201 WEST 103RD STREET SUITE 420 Address: Address: INDIANAPOLIS, IN 46290 City-St-Zip: City-St-Zip: () Delete Title: (X) Change () Addition Title: VΡ

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.

Name:

Address:

City-St-Zip:

BRIGGS, RICHARD A

INDIANAPOLIS, IN 46290

201 WEST 103RD STREET SUITE 420

SIGNATURE: RICHARD A BRIGGS VP 01/12/2009