2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# F01000006235

Entity Name: FUSION TELECOMMUNICATIONS INTERNATIONAL, INC.

Current Principal Place of Business:

420 LEXINGTON AVENUE
SUITE 1718
NEW YORK, NY 10170

New Principal Place of Business:

Current Mailing Address:

1475 W CYPRESS CREEK ROAD
SUITE 204
FORT LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 58-2342021 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUGHES, BARBARA
1475 W CYPRESS CREEK ROAD
SUITE 204
FORT LAUDERDALE, FL 33309 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:	COBD	( ) Delete
Name:	ROSEN, MARVIN S	
Address:	420 LEXINGTON AVE., SUITE 1718	
City-St-Zip:	NEW YORK, NY 10170	
Title:	CEOD	( ) Delete
Name:	ROSEN, MATTHEW D	
Address:	420 LEXINGTON AVE., SUITE 1718	
City-St-Zip:	NEW YORK, NY 10170	
Title:	TSD	( ) Delete
Name:	TURITS, PHILIP D	
Address:	420 LEXINGTON AVE., SUITE 1718	
City-St-Zip:	NEW YORK, NY 10170	
Title:	PCOO	( ) Delete
Name:	HUTCHINS, GORDON JR.	
Address:	420 LEXINGTON AVE., SUITE 1718	
City-St-Zip:	NEW YORK, NY 10170	
Title:	CFO	( ) Delete
Name:	HUGHES, BARBARA	
Address:	1475 W CYPRESS CREEK RD., SUITE 204	
City-St-Zip:	FORT LAUDERDALE, FL 33309	

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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: /S/ BARBARA HUGHES CFO 04/30/2009

Electronic Signature of Signing Officer or Director — Date