


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 30, 2006 8:00 am**  
**Secretary of State**

01-30-2006 90040 039 \*\*\*150.00

<b>DOCUMENT # F02000005525</b>		
1. Entity Name REAL LIVING NETWORK SERVICES, INC.		

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Principal Place of Business 77 EAST NATIONWIDE BLVD. COLUMBUS, OH 43215	Mailing Address 77 EAST NATIONWIDE BLVD. COLUMBUS, OH 43215
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01092006 Chg-P CR2E034 (11/05)

4. FEI Number 31-1002539	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO ROUDA, HARLEY E JR 77 EAST NATIONWIDE BLVD. COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Harley E. Rouda, Jr. CEO/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 77 East Nationwide Blvd. Columbus, OH 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHRIS, SHERRY 77 EAST NATIONWIDE BLVD. COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kaira S. Rouda P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 77 East Nationwide Blvd. Columbus, OH 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EDDY, PATRICIA A 77 EAST NATIONWIDE BLVD. COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Robert McAdams, Jr. S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 77 East Nationwide Blvd. Columbus, OH 43215
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RAWLINS, ROGER L JR 77 EAST NATIONWIDE BLVD. COLUMBUS, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  Harley E. Rouda, Jr. 1/19/06 (614) 459-7400  
Typed or printed name of signing officer or director Date Daytime Phone #