2007 FOR PROFIT CORPORATION ANNUAL REPORT

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Mar 27, 2007 8:00 am
Secretary of State
03-27-2007 90008 045 ***150.00

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1. Entity Name
UCN, INC.

Principal Place of Business	Mailing Address
14870 SOUTH PONY EXPRESS ROAD BLUFFDALE, UT 84065	14870 SOUTH PONY EXPRESS ROAD BLUFFDALE, UT 84065

03132007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 87-0528557 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC STERN, TED 14870 SOUTH PONY EXPRESS ROAD BLUFFDALE, UT 84065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Kevin Childs 14870 South Pony Express Road Bluffdale, UT 84065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DCE JARMAN, PAUL 14870 SOUTH PONY EXPRESS ROAD BLUFFDALE, UT 84065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO Brian Moroney 14870 South Pony Express Road Bluffdale, UT 84065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OZANNE, JAMES 14870 SOUTH PONY EXPRESS ROAD BLUFFDALE, UT 84065	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CTO Scott Welch 14870 South Pony Express Road Bluffdale, UT 84065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SMITH, G. DOUGLAS 14870 SOUTH PONY EXPRESS ROAD BLUFFDALE, UT 84065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Paul Koppe 14870 South Pony Express Road Bluffdale, UT 84065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CS PARTRIDGE, KIMM 14870 S PONY EXPRESS ROAD BLUFFDALE, UT 84065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Blake Fisher 14870 South Pony Express Road Bluffdale, UT 84065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARNETT, STEVE 14870 SOUTH PONY EXPRESS ROAD BLUFFDALE, UT 84065	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: K E Partridge Kimm Partridge 3-22-07 (866) 541-0000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #