

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001251

FILED  
Jul 24, 2006  
Secretary of State

**Entity Name:** EXODUS INTERNATIONAL -NORTH AMERICA, INCORPORATED

**Current Principal Place of Business:**

1353 PALMETTO AVENUE, SUITE 200  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 540119  
ORLANDO, FL 32854

**New Mailing Address:**

**FEI Number:** 52-1413470      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

CHAMBERS, ALAN  
1353 PALMETTO AVENUE, SUITE 200  
WINTER PARK, FL 32789 US

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

**OFFICERS AND DIRECTORS:**

Title: C ( ) Delete  
Name: HALEY, MIKE  
Address: 8605 EXPLORER DRIVE  
City-St-Zip: COLORADO SPRINGS, CO 80920

Title: V ( ) Delete  
Name: PHIL, BURRESS  
Address: 11175 READING ROAD, SUITE 103  
City-St-Zip: CINCINNATI, OH 45241

Title: T ( ) Delete  
Name: JOHN, SMID  
Address: 1620 BONNIE LANE, SUITE 101  
City-St-Zip: CORDOVA, TN 38016

Title: D ( ) Delete  
Name: CHAMBERS, ALAN  
Address: 1353 PALMETTO AVENUE, SUITE 200  
City-St-Zip: WINTER PARK, FL 32789

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALAN CHAMBERS

D

07/24/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date