

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000106

Entity Name: REVOLVE MEDIA, INC.

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

1725 ROE CREST DR  
NORTH MANKATO, MN 56003

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 3728  
NORTH MANKATO, MN 560023728

## New Mailing Address:

1725 ROE CREST DR  
NORTH MANKATO, MN 56003

FEI Number: 20-0555228

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: D ( ) Delete  
Name: TAYLOR, GLEN  
Address: 1725 ROE CREST DR  
City-St-Zip: NORTH MANKATO, MN 56003

Title: D ( ) Delete  
Name: SCHREIER, BRADLEY  
Address: 1725 ROE CREST DR  
City-St-Zip: NORTH MANKATO, MN 56003

Title: D ( ) Delete  
Name: TAYLOR, JEAN  
Address: 1725 ROE CREST DR  
City-St-Zip: NORTH MANKATO, MN 56003

Title: P ( ) Delete  
Name: DUCKETT, JOE  
Address: 650 TECHNOLOGY PARK  
City-St-Zip: LAKE MARY, FL 32746

Title: CFO ( ) Delete  
Name: JOHNSON, THOMAS  
Address: 1725 ROE CREST DR  
City-St-Zip: NORTH MANKATO, MN 56003

Title: SEC ( ) Delete  
Name: JACKSON, GREGORY  
Address: 1725 ROE CREST DR  
City-St-Zip: NORTH MANKATO, MN 56003

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition  
Name: TAYLOR, LARRY  
Address: 1725 ROE CREST DR  
City-St-Zip: NORTH MANKATO, MN 56003

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: GREGORY W JACKSON

SEC

01/14/2009

Electronic Signature of Signing Officer or Director

Date