2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002407

Entity Name: ALL COVERED, INC.

FILED Jan 21, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8875 HIDDEN RIVER PKWY, SUITE 300 TAMPA, FL 33637 **Current Mailing Address: New Mailing Address:** 101 REDWOOD SHORES PKWY, SUITE 200 101 REDWOOD SHORES PKWY, SUITE 110 REDWOOD CITY, CA 94065 REDWOOD CITY, CA 94065 FEI Number: 94-3281881 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete CFO Title: () Change () Addition Name: MOTT, TIM Name: 101 REDWOOD SHORES PKWY STE 110 Address: Address: City-St-Zip: REDWOOD CITY, CA 94065 City-St-Zip: Title: CFO Title: () Delete () Change () Addition Name: LAUGHLIN, KEVIN Name: 101 REDWOOD SHORES PKWY STE 110 Address: Address: REDWOOD CITY, CA 94065 City-St-Zip: City-St-Zip: Title: Title: DIR () Delete () Change () Addition BOB, TODD Name: Name: 101 REDWOOD SHORES PKWAY, STE 110 Address: Address: City-St-Zip: REDWOOD CITY, CA 94065 City-St-Zip: Title: DIR Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: KEVIN LAUGHLIN **CFO** 01/21/2008

() Delete

REDWOOD CITY, CA 94065

101 REDWOOD SHORES PKWAY, STE 100

JOHN, DREW

Name:

Address:

City-St-Zip: