


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 07, 2006 8:00 am
Secretary of State

08-07-2006 90043 025 ***150.00

DOCUMENT # F04000005108

1. Entity Name
MIVA, INC.



Principal Place of Business
**5220 SUMMERLIN COMMONS BLVD.
 SUITE 500
 FT. MYERS, FL 33907 US**

Mailing Address
**5220 SUMMERLIN COMMONS BLVD.
 SUITE 500
 FT. MYERS, FL 33907 US**

50024526



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

07202006 Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent
**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301-2525**

4. FEI Number
88-0348835

Applied For
 Not Applicable

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

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 _____ 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
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO PISARIS-HENDERSON, CRAIG A 5220 SUMMERLIN COMMONS BLVD., SUITE 500 FT. MYERS, FL 33907	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD THUNE, PHILLIP R 5220 SUMMERLIN COMMONS BLVD., SUITE 500 FT. MYERS, FL 33907	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BREWSTER, DANIEL 470 TACONIC ROAD GREENWICH, CT 06831	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEPP, GERALD 27400 NORTHWESTERN HIGHWAY SOUTHFIELD, MI 48034	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUEST, FREDERICK E II 10 WEST 66TH STREET NEW YORK, NY 10023	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMONSON, LEE 61 WEST 62ND STREET, APT. 20G NEW YORK, NY 10023	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THUNE, PHILLIP R 5220 SUMMERLIN COMMONS BLVD., SUITE 500 FT. MYERS, FL 33907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO CORRAO, PETER A. 5220 SUMMERLIN COMMONS BLVD., SUITE 500 FT. MYERS, FL 33907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D BISHOP, SEBASTIAN 5220 SUMMERLIN COMMONS BLVD., SUITE 500 FT. MYERS, FL 33907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO/T SEIPPEL, WILLIAM 5220 SUMMERLIN COMMONS BLVD., SUITE 500 FT. MYERS, FL 33907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GC/S PISARIS, JOHN 5220 SUMMERLIN COMMONS BLVD., SUITE 500 FT. MYERS, FL 33907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D WEBER, LAWRENCE 404 WYMAN STREET, SUITE 375 WALTHAM, MA 02451	<input type="checkbox"/> Change <input checked="" 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: *[Signature]* **7/28/06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

ATTACHMENT

50024226

MIVA, Inc.
2006 For Profit Corporation Annual Report
Document No. F0400005108

CONTINUATION OF ITEM 11 – ADDITIONS TO LIST OF OFFICERS AND DIRECTORS

Addition

Title: CTO
Name: Anthony Garcia
Street Address: 5220 Summerlin Commons Blvd; Suite 500
City – ST – Zip Fort Myers, FL 33907

Addition

Title: SVP
Name: S. Brian Murkherjee
Street Address: 5220 Summerlin Commons Blvd; Suite 500
City – ST – Zip Fort Myers, FL 33907

Addition

Title: M
Name: Adam Poulter
Street Address: 5220 Summerlin Commons Blvd; Suite 500
City – ST – Zip Fort Myers, FL 33907

Addition

Title: D
Name: Charles P. Rothstein
Street Address: 32330 W. 12 Mile Road
City – ST – Zip Farmington Hills, MI 48334