

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002001

Entity Name: ACTION TARGET INC.

FILED
Feb 14, 2007
Secretary of State

Current Principal Place of Business:

1281 WEST 220 NORTH
PROVO, UT 84601

New Principal Place of Business:

Current Mailing Address:

PO BOX 636
PROVO, UT 84603

New Mailing Address:

FEI Number: 87-0446056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HATCH, JOHN D ESQ
840 S.E. 5TH STREET
OCALA, FL 34471 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: CP () Delete
Name: BATEMAN, KYLE
Address: 1281 WEST 220 NORTH
City-St-Zip: PROVO, UT 84601

Title: VC (X) Delete
Name: HANSEN, MARK
Address: 1281 WEST 220 NORTH
City-St-Zip: PROVO, UT 84601

Title: DVP () Delete
Name: CURTIS, JOHN
Address: 1281 WEST 220 NORTH
City-St-Zip: PROVO, UT 84601

Title: DS () Delete
Name: SOVINE, ADDISON
Address: 1281 WEST 220 NORTH
City-St-Zip: PROVO, UT 84601

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADDISON SOVINE

DS

02/14/2007

Electronic Signature of Signing Officer or Director

Date