2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002280

TRAMMELL, DAVID L

1202 SOUTH 15TH STREET

CHICKASHA, OK 73018

Name:

Address: City-St-Zip:

Entity Name: FINANCIAL TECHNOLOGY LABORATORIES, INC.

FILED Feb 07, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 353 LANERNBACK ISLAND DR SATELLITE BEACH, FL 32937 **Current Mailing Address: New Mailing Address:** 353 LANERNBACK ISLAND DR SATELLITE BEACH, FL 32937 FEI Number: 20-2350798 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: RUCKER, JAMES 353 LANERNBACK ISLAND DR US SATELLITE BEACH, FL 32937 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 () Change () Addition RUCKER, JAMES B Name: Name: 353 LANERNBACK ISLAND DR Address: Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: Title: VCVP (X) Delete Title: () Change () Addition Name: HANNON, THOMAS J Name: 101 SHELTON PLACE Address: Address: EDMOND, OK 73034 City-St-Zip: City-St-Zip: Title: Title: DS (X) Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES B. RUCKER CP 02/07/2006