2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002528

Entity Name: CAPTURE, INC.

FILED Mar 21, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 334 KNIGHT ST., #133 601 JEFFERSON BLVD. WARWICK, RI 02886 WARWICK, RI 02886 **Current Mailing Address: New Mailing Address:** 924 SE CENTRAL PARKWAY STUART, FL 34994 FEI Number: 05-0490957 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARION, STUART H MARION, MAUREEN 924 SE ĆENTRAL PARKWAY 924 SE CENTRAL PARKWAY STUART, FL 34994 STUART, FL 34994 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: MAUREEN MARION 03/21/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PSC () Delete Title: () Change () Addition MARION, STUART H Name: Name: 1594 SW PITTS AVE Address: Address: City-St-Zip: PORT ST LUCIE, FL 34953 City-St-Zip: Title: VTVC () Delete Title: () Change () Addition Name: MARION, MAUREEN Name: 1594 SW PITTS AVE Address: Address: PORT ST LUCIE, FL 34953 City-St-Zip: 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: MAUREEN MARION **VTVC** 03/21/2006