2007 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 07, 2007 8:00 am DOCUMENT # F05000006508 Secretary of State PALADIN DATA SYSTEMS CORPORATION 08-07-2007 90026 038 ***150.00 Principal Place of Business Mailing Address 19362 POWDER HILL PLACE NE 19362 POWDER HILL PLACE NE POULSBO, WA 98370 POULSBO, WA 98370 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07062007 Chq-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 91-1670217 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FI 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 14, 2007 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE CV ☐ Delete TITLE ☐ Change ▼ Addition Lynn LaSof MACY, GARY NAME NAME 9362 Powder Hill PL NE 19362 POWDER HILL PLACE NE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POULSBO, WA 98370 CITY-ST-ZIP TITLE D Z Delete TITLE ☐ Change ■ Addition NAME NALL, JIM NAME 19362 POWDER HILL PLACE NE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POULSBO, WA 98370 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition JOHNSTON ROBERT NAME NAME 19362 POWDER HILL PLACE NE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP POULSBO, WA 98370 CITY-ST-ZIP TITLE **PCEO** ☐ Delete TITLE ☐ Change Addition NALL, JAMES NAME STREET ADDRESS 19362 POWDER HILL PLACE NE STREET ADDRESS CITY-ST-ZIP POULSBO, WA 98370 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition DVORAK, MICHELLE NAME MAME STREET ADDRESS 19362 POWDER HILL PLACE NE STREET ADDRESS CITY-ST-ZIP POULSBO, WA 98370 CITY-ST-ZIP TITLE X Delete ☐ Change Addition PAGE, JAMES NAME 19362 POWDER HILL PLACE NE STREET ADDRESS STREET ADDRESS CITY-ST-7IP POULSBO, WA 98370 CITY-ST-7IP

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:

ATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HIQO Date

FILED

360-394-5924 Daysme Phone #