2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000002057

Entity Name: FAN DIVA, INC.

FILED Jan 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

100 RIALTO PLACE, STE 700 MELBOURNE, FL 32901

Current Mailing Address: New Mailing Address:

100 RIALTO PLACE, STE 700 MELBOURNE, FL 32901

FEI Number: 26-2376224 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:

SNOVER, KIMBERLY J
7380 SAND LAKE ROAD, SUITE 500
334 ARROWHEAD LANE

ORLANDO, FL 32819 US MELBOURNE BEACH, FL 32951 US

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: KIMBERLY J SNOVER 01/28/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CPS () Delete Title: CPS (X) Change () Addition

Name: CASEY, JOHN P Name: CASEY, JOHN P

 Address:
 7380 SAND LAKE ROAD, SUITE 500
 Address:
 100 RIALTO PLACE, STE 700

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 MELBOURNE, FL 32901

Title: VCVP () Delete Title: VCVP (X) Change () Addition

Name:SNOVER, KIMBERLY JName:SNOVER, KIMBERLY JAddress:7380 SAND LAKE ROAD, SUITE 500Address:100 RIALTO PLACE, STE 700City-St-Zip:ORLANDO, FL 32819City-St-Zip:MELBOURNE, FL 32901

Title: D () Delete Title: D (X) Change () Addition Name: COLLINS CASEY, MEREDITH Name: COLLINS CASEY, MEREDITH Address: 7380 SAND LAKE ROAD, SUITE 500 Address: 100 RIALTO PLACE, STE 700

City-St-Zip: ORLANDO, FL 32819

City-St-Zip: MELBOURNE, FL 32901

Title: D () Delete Title: D (X) Change () Addition Name: CASEY, CHRISTINE ANNE

Name: CASEY, CHRISTINE ANNE

 Address:
 7380 SAND LAKE ROAD, SUITE 500
 Address:
 100 RIÁLTO PLACE, STE 700

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 MELBOURNE, FL 32901

I hereby certify that the information supplied with this filing does not qualify 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: KIMBERLY J SNOVER VCVP 01/28/2009