2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004381

Entity Name: DARK CORPORATION OF TN

FILED Jul 05, 2006 Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | |
|--------------------------------------|--|--------------------------------------|------------------------------------|---|
| | MPBELL RD TTSVILLE, TN | 370722910 US | | |
| Current Mailing Address: | | | New Mailing Address: | |
| | MPBELL RD TTSVILLE, TN | 370722910 US | | |
| FEI Number | : 62-1607848 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () |
| Name and | d Address of (| Current Registered Agent: | Name and Address of | New Registered Agent: |
| | , KEVIN RPORATE SQL IVILLE, FL 32: | | | |
| | e named entity e of Florida. | submits this statement for the | purpose of changing its registered | office or registered agent, or both, |
| SIGNATU | RE: | | | |
| | Electro | nic Signature of Registered Ag | ent | Date |
| | | 3(2)(b), F.S., the corporation did n | ot receive the prior notice. | |
| | mpaign Financin S AND DIREC | g Trust Fund Contribution (). | ADDITIONS/CHANGE | S TO OFFICERS AND DIRECTOR: |
| | | | | |
| Title: Name: | P (ANCELIN, KEV |) Delete IN | Title: Name: | () Change () Addition |
| Address: | | NORS SQUARE | Address: | |
| City-St-Zip: | JACKSONVILL | | City-St-Zip: | |
| Title: | т (|) Delete | Title: | () Change () Addition |
| Name: | ANCELIN, AND | | Name: | () Change () Hadition |
| Address: | 3385 AVALON | | Address: | |
| City-St-Zip: | JACKSONVILL | | City-St-Zip: | |
| Title: | V (|) Delete | Title: | () Change () Addition |
| Name: | COOK, DAVID | | Name: | () |
| Address: | 408 RUSSELL | | Address: | |
| City-St-Zip: | NASHVILLE, T | | City-St-Zip: | |
| Title: | S (|) Delete | Title: | () Change () Addition |
| Name: | JOHNSON, RC | | Name: | · / · · · · · · · · · · · · · · · · · · |
| Address: | 502 W CAMPE | | Address: | |
| City-St-Zip: | GOODLETTSV | ILLE. TN 370722910 | 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: RON JOHNSON S 07/05/2006