

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002086

FILED
Apr 23, 2008
Secretary of State

Entity Name: SPECTRUM RESEARCH GROUP INC.

Current Principal Place of Business:

1748 INDEPENDENCE BLVD.,
SUITE F-2
SARASOTA, FL 34234 US

New Principal Place of Business:

209 N.E. 5TH TERRACE
DELRAY BEACH, FL 33444 US

Current Mailing Address:

P. O. BOX 5096
SARASOTA, FL 34277 US

New Mailing Address:

209 N.E. 5TH TERRACE
DELRAY BEACH, FL 33444 US

FEI Number: 65-0733939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JOHN
1860 RIVIERA CIRCLE
SARASOTA, FL 34232 US

Name and Address of New Registered Agent:

DOCHERTY, MICHAEL
209 N.E. 5TH TERRACE
DELRAY BEACH, FL 33444 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: MICHAEL DOCHERTY

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBINSON, JOHN
Address: 1860 RIVIERA CIRCLE
City-St-Zip: SARASOTA, FL 34232 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DOCHERTY, MICHAEL
Address: 209 N.E. 5TH TERRACE
City-St-Zip: DELRAY BEACH, FL 33444 US

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: MICHAEL DOCHERTY

D

04/23/2008

Electronic Signature of Signing Officer or Director

Date