

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G83041

Entity Name: GENEVA SYSTEMS, INC.

FILED
Feb 01, 2007
Secretary of State

Current Principal Place of Business:

7378 SUNRISE BLVD
STE 100
KEYSTONE HEIGHTS, FL 32656 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8455
FLEMING ISLAND, FL 32006 US

New Mailing Address:

FEI Number: 59-2375282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMULLEN, ROBERT J.
6857 CR 214
MELROSE, FL 32666 US

Name and Address of New Registered Agent:

MCMULLEN, ROBERT J.
305 SENIC POINT LANE
ORANGE PARK, FL 32003 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:

02/01/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: STV () Delete
Name: MCMULLEN, KAREN G.,
Address: 305 SCENIC POINT LANE
City-St-Zip: ORANGE PARK, FL 32003

Title: CP () Delete
Name: MCMULLEN, ROBERT J.,
Address: 305 SCENIC POINT LANE
City-St-Zip: ORANGE PARK, FL 32003

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ROBERT J. MCMULLEN

PRES

02/01/2007

Electronic Signature of Signing Officer or Director

Date