2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 30, 2006
Secretary of State

DOCUMENT# K94666

Entity Name: ORAM DISTRIBUTORS, INC.

Current Principal Place of Business:

142 MILL CREEK RD
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

142 MILL CREEK RD
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-2956124 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAXWELL, RONALD W
4800 BEACH BLVD STE # 5
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

MAXWELL, RONALD W
1812 UNIVERSITY BLVD S
JACKSONVILLE, FL 32216 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: RONALD W. MAXWELL 08/30/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: ORAM, JOHN H.,
Address: 1224 JAMAICA CT.
City-St-Zip: JACKSONVILLE, FL

Title: D ( ) Delete
Name: ORAM, JOYCE A.,
Address: 1224 JAMAICA CT.
City-St-Zip: JACKSONVILLE, FL

Title: V ( ) Delete
Name: CASON, MELODY L.,
Address: 9803 CREEKFRONT RD 1203
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: V (X) Change ( ) Addition
Name: CASON, MELODY L.,
Address: 3613 BOWDEN CIRCLE W
City-St-Zip: JACKSONVILLE, FL 32216

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: JOHN H. ORAM PRES 08/30/2006
Electronic Signature of Signing Officer or Director Date