


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008 08:00 AM
Secretary of State

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| DOCUMENT # N00000001512 |  |
| 1. Entity Name PRIORITY NETHANG, INC. | |

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| Principal Place of Business 6240 NW 17TH CT SUNRISE, FL 33313 | Mailing Address 6240 NW 17TH CT SUNRISE, FL 33313 |
|---|---|

DO NOT WRITE IN THIS SPACE



01222008 No Chg-NP CR2E037 (4/06)

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|------------------------------------|--|
| 4. FEI Number 65-0974547 | Applied For <input type="checkbox"/> Not Applicable |
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| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |
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| 6. Name and Address of Current Registered Agent WRIGHT, GAINUS III 6240 NW 17TH CT SUNRISE, FL 33313 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

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| Filing Fee is \$61.25 Due by May 1, 2008 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | U00000831392 02/27/08-80016-017 70.00 |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD WRIGHT, GAINUS III 6240 NW 17TH CT SUNRISE, FL 33313 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD WRIGHT, CYD 6240 NW 17TH CT SUNRISE, FL 33313 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD WRIGHT, LILLIAN T 2780 NW 26TH AVE FT LAUDERDALE, FL 33311 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

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|---|---------------------|--------------------------------|
| SIGNATURE: <u>Cyd R. Wright</u> , CYD R. WRIGHT | <u>2-16-2008</u> | <u>9547393582</u> |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | <small>Date</small> | <small>Daytime Phone #</small> |