## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

above, or on an attachment with an address, with all other like empowered.

Electronic Signature of Signing Officer or Director

SIGNATURE: CARL E. CREASMAN, JR.

## DOCUMENT# N1400000488

Entity Name: NUMINOUS, INC.

FILED Jan 19, 2007 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
		4600 GABRIELLA LANE OVIEDO, FL 32765	
Current Mailing Address:		New Mailing Address:	
PO BOX 217 WINTER PARK, FL 327900217			
FEI Number:	59-3693508 FEI Number Applied For ( ) FEI Nu	mber Not Applicable ( )	Certificate of Status Desired ( )
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
CREASMAN, CARL E JR 2013 KIMBRACE PLACE WINTER PARK, FL 32792 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:			
Electronic Signature of Registered Agent			Date
Election Campaign Financing Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () Delete CREASMAN, CARL E JR 2013 KIMBRACE PLACE WINTER PARK, FL 32792	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete CREASMAN, KIM 2013 KIMBRACE PLACE WINTER PARK, FL 32792 US	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D ( ) Delete AEDO, JOHN 2832 REVERE COURT CASSELBERRY, FL 32707 US	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () Delete KUTCHER, CHRIS 5032 CARNEGIE LANE #104 SANFORD, FL 32771 US	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	D () Delete PORTER, MATTHEW E 1875 SHADYHILL TERRACE WINTER PARK, FL 32792 US	Title: ( Name: Address: City-St-Zip:	()Change ()Addition
Title: Name: Address: City-St-Zip:	D () Delete DELANEY, CHRISTOPHER 7297 SHOALS DR. APT. A ORLANDO, FL 32817 US	Title: ( Name: Address: City-St-Zip:	( ) Change ( ) Addition
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			

D

01/19/2007

Date