

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000017245

FILED
Aug 02, 2006
Secretary of State**Entity Name:** ZYBOR, INC.**Current Principal Place of Business:**1950 SUMMIT PARK DR., SUITE 300
ORLANDO, FL 32810**New Principal Place of Business:**1950 SUMMIT PARK DR
SUITE 300
ORLANDO, FL 32810 US**Current Mailing Address:**1950 SUMMIT PARK DR., SUITE 300
ORLANDO, FL 32810**New Mailing Address:**1950 SUMMIT PARK DR.
SUITE 300
ORLANDO, FL 32810 US**FEI Number:** 59-3624371**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ZOM DEVELOPMENT, INC.
1950 SUMMIT PARK DR., SUITE 300
ORLANDO, FL 32810 US**Name and Address of New Registered Agent:**ZOM DEVELOPMENT, INC.
1950 SUMMIT PARK DR.
SUITE 300
ORLANDO, FL 32810 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:

08/02/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PATTERSON, STEVEN W
Address: 1950 SUMMIT PARK DR., SUITE 300
City-St-Zip: ORLANDO, FL 32810

Title: V () Delete
Name: STEPHENS, SAMUEL C III
Address: 1950 SUMMIT PARK DRIVE, SUITE 300
City-St-Zip: ORLANDO, FL 32810

Title: V () Delete
Name: BUCK, STEVEN K
Address: 1950 SUMMIT PARK DRIVE, SUITE 300
City-St-Zip: ORLANDO, FL 32810

Title: V (X) Delete
Name: NICHOLAS, JOHN L JR.
Address: 1950 SUMMIT PARK DRIVE, SUITE 300
City-St-Zip: ORLANDO, FL 32810

Title: S () Delete
Name: SLATER, JAMES E ESQ.
Address: 1950 SUMMIT PARK DRIVE, SUITE 300
City-St-Zip: ORLANDO, FL 32810

Title: VT () Delete
Name: ROSS, KIMBERLY P
Address: 1950 SUMMIT PARK DRIVE SUITE 300
City-St-Zip: ORLANDO, FL 32810

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: EVP (X) Change () Addition
Name: STEPHENS, SAMUEL C III
Address: 1950 SUMMIT PARK DRIVE, SUITE 300
City-St-Zip: ORLANDO, FL 32810

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

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

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: SAMUEL C. STEPHENS, III

EVP

08/02/2006

Electronic Signature of Signing Officer or Director

Date