2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2006
Secretary of State

DOCUMENT# P00000024561

Entity Name: METHODFACTORY, INC.

Current Principal Place of Business:

240 N. WASHINGTON BLVD.
SUITE 260
SARASOTA, FL 34236 US

New Principal Place of Business:

Current Mailing Address:

240 N. WASHINGTON BLVD.
SUITE 260
SARASOTA, FL 34236 US

New Mailing Address:

FEI Number: 65-0990922 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLIAMSON, JAMES
240 N. WASHINGTON BLVD.
SUITE 260
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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:

Title: D ( ) Delete
Name: AUER, SCOTT
Address: 240 N. WASHINGTON BLVD., STE. 260
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete
Name: WILLIAMSON, JAMES
Address: 240 N. WASHINGTON BLVD., SUITE 260
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete
Name: BRADY, MICHAEL
Address: 240 N. WASHINGTON BLVD., SUITE 260
City-St-Zip: SARASOTA, FL 34236

Title: D ( ) Delete
Name: BAILEY, JIM
Address: 240 N. WASHINGTON BLVD., SUITE 260
City-St-Zip: SARASOTA, FL 34236

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

Title: D ( ) Change (X) Addition
Name: WALTER, STEVE
Address: 240 N. WASHINGTON BLVD., SUITE 260
City-St-Zip: SARASOTA, FL 34236

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: JAMES WILLIAMSON D 02/15/2006

Electronic Signature of Signing Officer or Director — Date