

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000044338

Entity Name: LEADING MEDIA, INC.

FILED
Apr 24, 2006
Secretary of State

Current Principal Place of Business:

229 2ND STREET
HOLLY HILL, FL 32117

New Principal Place of Business:

Current Mailing Address:

PO BOX 10252
DAYTONA BEACH, FL 32120

New Mailing Address:

FEI Number: 59-3648620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STANTON, DAVID S
307 SAMILL CREEK COURT
ORMOND BEACH, FL 32174 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: PTD () Delete
Name: STANTON, DAVID S
Address: 105 RACEWAY POINTE DR.
City-St-Zip: DAYTONA BEACH, FL 32114 US

Title: VPSD () Delete
Name: PANEK, ROBERT M
Address: 1023 CALLE GRANDE
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSD (X) Change () Addition
Name: STANTON, ALLISON J
Address: 105 RACEWAY POINTE DR. #304
City-St-Zip: DAYTONA BEACH, FL 32114 US

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: DAVID S STANTON

PTD

04/24/2006

Electronic Signature of Signing Officer or Director

_____ Date