

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000056265

FILED  
Jul 20, 2007  
Secretary of State

Entity Name: DIGITAL HEARING AID PLACE INC.

## Current Principal Place of Business:

4951 TAMIAMI TRAIL N. #104  
NAPLES, FL 34109

## New Principal Place of Business:

## Current Mailing Address:

4951 TAMIAMI TRAIL N. #104  
NAPLES, FL 34109

## New Mailing Address:

FEI Number: 59-3650583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

EVANS, SUSAN D ESQUIRE  
1404 GOODLETTE ROAD N.  
NAPLES, FL 34102 US

## Name and Address of New Registered Agent:

ALM MANAGEMENT CORP  
2323 CANNOLOT BOULEVARD  
PORT CHARLOTTE, FL 33948 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: ALAN L. MITCHELL

07/20/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: STOLZENBACH, BARBARA  
Address: 4951 TAMIAMI TRAIL N. #104  
City-St-Zip: NAPLES, FL 34109

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: MITCHELL, BARBARA A  
Address: 4951 TAMIAMI TRAIL N. #104  
City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify 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: BARBARA A. MITCHELL

PSTD

07/20/2007

Electronic Signature of Signing Officer or Director

Date