

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000060470

Entity Name: STATESIDE, INC.

FILED
Jan 26, 2006
Secretary of State

Current Principal Place of Business:

7512 DR. PHILLIPS BLVD.
SUITE 50 PMB 502
ORLANDO, FL 32819

New Principal Place of Business:

7512 DR. PHILLIPS BLVD.
SUITE 50-502
ORLANDO, FL 32819

Current Mailing Address:

7512 DR. PHILLIPS BLVD.
SUITE 50 PMB 502
ORLANDO, FL 32819

New Mailing Address:

7512 DR. PHILLIPS BLVD.
SUITE 50-502
ORLANDO, FL 32819

FEI Number: 26-0078186

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWSWELL, SAMANTHA
7512 DR. PHILLIPS BLVD.
SUITE 50 - 502
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

STATESIDE VHR LTD
7512 DR. PHILLIPS BLVD.
SUITE 50-502
ORLANDO, FL 32819 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: SAMANTHA ROWSWELL

01/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROWSWELL, SAMANTHA
Address: 7512 DR PHILLIPS BLVD SUITE 50-502
City-St-Zip: ORLANDO, FL 32819

Title: D (X) Delete
Name: BRILEY, JACQUELINE
Address: 7512 DR PHILLIPS BLVD SUITE 50-502
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STATESIDE VHR LTD,
Address: 7512 DR PHILLIPS BLVD, SUITE 50-502
City-St-Zip: ORLANDO, FL 32819

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: SAMANTHA ROWSWELL

MRS

01/26/2006

Electronic Signature of Signing Officer or Director

Date