2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000079853

Entity Name: STRATEGY NAVIGATORS, INC.

JACKSONVILLE, FL 32258

City-St-Zip:

FILED Mar 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4311 RUSTLING LEAF LANE 5397 NW 15 PLACE JACKSONVILLE, FL 32258 GAINESVILLE, FL 32605 **Current Mailing Address: New Mailing Address:** 5397 NW 15 PLACE GAINESVILLE, FL 32605 FEI Number: 59-3683116 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: AMASON, ROBERT F JR. 5397 NW 15 PLACE GAINESVILLE, FL 32605 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition AMASON, ROBERT F JR. Name: Name: 5397 NW 15 PLACE Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip: Title: VST (X) Delete Title: () Change () Addition Name: AMASON, GABRIELLE S Name: 4311 RUSTWING LEAF LANE Address: 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: ROBERT F. AMASON, JR. PRES 03/26/2007