## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000098315

Entity Name: AFTERNIC, INC.

FILED Apr 23, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
7 WEST MAIN STREET SUITE 800 APOPKA, FL 32703				116 OLYMPUS DR OCOEE, FL 34761			
Current Mailing Address:				New Mailing Address:			
7 WEST MAIN STREET SUITE 800 APOPKA, FL 32703			116 OLYMPUS DR OCOEE, FL 34761				
FEI Number:	65-1050805	FEI Number Applied For ( )	FEI Num	nber Not Appli	cable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
COLLINS, ROGER 7 WEST MAIN STREET SUITE 800 APOPKA, FL 32703 US				COLLINS, ROGER 116 OLYMPUS DR OCOEE, FL 34761 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.							
SIGNATUR	E: ROGER (	COLLINS				04/23/2008	
	Electron	nic Signature of Registered Agent				Date	
Election Campaign Financing Trust Fund Contribution ( ).							
OFFICERS AND DIRECTORS: AD				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	COLLINS, ROG	STREET STE 800		Title: Name: Address: City-St-Zip:	D COLLINS, F 116 OLYMF OCOEE, FL	PUS DR	
Title: Name: Address: City-St-Zip:	COLLINS, MICH	STREET STE 800		Title: Name: Address: City-St-Zip:	D COLLINS, M 1118 CROV APOPKA, F	WN ISLE CIR	
Title: Name: Address: City-St-Zip:	CONLIN, KELLI	30 THIRD AVENUE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	COO (X) BENNETT, JEF NAMEMEDIA, 2 WALTHAM, MA	FREY S 30 THIRD AVENUE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CHIPPARI, VIN	30 THIRD AVENUE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LUCY, BRIAN D	30 THIRD AVENUE		Title: Name: Address: City-St-Zip:		() Change () Addition	

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: ROGER COLLINS D 04/23/2008