

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115344

Entity Name: PSTN, INC.

FILED  
Jun 13, 2008  
Secretary of State

## Current Principal Place of Business:

11509 DR. MLK BLVD, EAST  
MANGO, FL 33550

## New Principal Place of Business:

19901 FRONT BEACH ROAD  
PANAMA CITY BEACH, FL 32413

## Current Mailing Address:

PO BOX 1187  
MANGO, FL 33550

## New Mailing Address:

PO BOX 724914  
ATLANTA, GA 31139

FEI Number: 59-3682800

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ELDRIDGE, GEORGE T  
11509 E DR M L KING JR BLVD  
MANGO, FL 33550 US

## Name and Address of New Registered Agent:

FLOYD, PATRICIA A  
13916 BRAMBLE BUSH COURT  
ORLANDO, FL 32832 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: PATRICIA FLOYD

06/13/2008

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: D ( ) Delete  
Name: HORSTEMEYER, SCOTT A  
Address: PO BOX 724914  
City-St-Zip: ATLANTA, FL 31139 US

Title: S ( ) Delete  
Name: ELDRIDGE, GEORGE T  
Address: 11509 E DR. MLK BLVD.  
City-St-Zip: MANGO, FL 33550

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change ( ) Addition  
Name: COCHRAN, DON M  
Address: 5D OWENS LANE  
City-St-Zip: MAULDIN, SC 29662

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: SCOTT HORSTEMEYER

D

06/13/2008

Electronic Signature of Signing Officer or Director

Date