2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000115995

Entity Name: NAVIGY, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4800 DEERWOOD CAMPUS PKWY SUITE 100-7TH FLOOR JACKSONVILLE, FL 322468273					
Current Mailing Address:			New Mailing Address:		
4800 DEERWOOD CAMPUS PKWY SUITE 100-7TH FLOOR JACKSONVILLE, FL 322468273					
FEI Number:	59-3688055	FEI Number Applied For () FEI Num	mber Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
JOLLY, AREZOU C 4800 DEERWOOD CAMPUS PKWY BLDG 100 7TH FLOOR JACKSONVILLE, FL 322468273 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:			ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GRANTHAM, L. J	DD CAMPUS PKWY	Title: Name: Address: City-St-Zip:	PCEO (X) Change () Addition HARDEMAN, DONALD M 4800 DEERWOOD CAMPUS PKWY JACKSONVILLE, FL 322468273	
Title: Name: Address: City-St-Zip:	HARDEMAN, DO	DD CAMPUS PKWY	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DOERR, R. CHRIS 4800 DEERWOOD CAMPUS PKWY JACKSONVILLE, FL 322468273	
Title: Name: Address: City-St-Zip:	DOERR, R. CHR	DD CAMPUS PKWY	Title: Name: Address: City-St-Zip:	D (X) Change () Addition LIVERMORE, ARNOLD (DUKE) 4800 DEERWOOD CAMPUS PKWY JACKSONVILLE, FL 322468273	
Title: Name: Address: City-St-Zip:	READ, KIM	Delete DD CAMPUS PKWY FL 322468273	Title: Name: Address: City-St-Zip:	T (X) Change () Addition HOGAN, JONATHAN 4800 DEERWOOD CAMPUS PKWY JACKSONVILLE, FL 322468273	
Title: Name: Address: City-St-Zip:	JOLLY, AREZOL	DD CAMPUS PKWY	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RYDER, FRED	Delete DD CAMPUS PKWY FL 32246	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: AREZOU C. JOLLY S 04/28/2009