

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000116786

FILED
Jan 14, 2008
Secretary of State

Entity Name: NETWORK COMMUNICATIONS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

6080 GULF BREEZE PARKWAY
GULF BREEZE, FL 32561

New Principal Place of Business:

6080 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

Current Mailing Address:

6080 GULF BREEZE PARKWAY
GULF BREEZE, FL 32561

New Mailing Address:

6080 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563

FEI Number: 59-3690020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, TIMOTHY G
1137 GULF BREEZE PARKWAY
GULF BREEZE, FL 32561 US

Name and Address of New Registered Agent:

MCDONALD, TIMOTHY G
6080 GULF BREEZE PARKWAY
GULF BREEZE, FL 32563 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: TIMOTHY G. MCDONALD

01/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MCDONALD, TIMOTHY G
Address: 1137 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32561

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MCDONALD, TIMOTHY G
Address: 6080 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

Title: VP () Change (X) Addition
Name: MCDONALD, STEVEN G
Address: 6080 GULF BREEZE PARKWAY
City-St-Zip: GULF BREEZE, FL 32563

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: TIMOTHY G. MCDONALD

PD

01/14/2008

Electronic Signature of Signing Officer or Director

Date