2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# P01000047590

Entity Name: THE ULTIMATE CONNECTION, INC.

Current Principal Place of Business:

18215 PAULSON DRIVE
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

Current Mailing Address:

200 EAST VENICE AVENUE
VENICE, FL 34285

New Mailing Address:

FEI Number: 65-1120849 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALROND, ALAN
200 EAST VENICE AVENUE
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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:

Title: C ( ) Delete
Name: DUNN-RANKIN, DEREK
Address: 200 E VENICE AVE
City-St-Zip: VENICE, FL 34285

Title: D ( ) Delete
Name: DUNN-RANKIN, DEBBIE
Address: 23170 HARBORVIEW ROAD
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: DV ( ) Delete
Name: DUNN-RANKIN, DAVID
Address: 23170 HARBORVIEW ROAD
City-St-Zip: CHARLOTTE HARBOR, FL 33980

Title: D ( ) Delete
Name: MOONEY, BURGETT H
Address: 305 E 6TH ST
City-St-Zip: ROME, GA 30162

Title: DV ( ) Delete
Name: VEDDER, ROBERT
Address: 305 E 6TH ST
City-St-Zip: ROME, GA 30162

Title: D ( ) Delete
Name: VEDDER, BYRON C
Address: 3 STANFORD PL
City-St-Zip: CHAMPAIGN, IL 61820

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: ALAN L. WALROND CFO 04/30/2008

Electronic Signature of Signing Officer or Director — Date