2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000095598

Entity Name: MIDNIGHT SUN, INC.

FILED Feb 24, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Cilrrent Principal Place of Bliginess	NAW Principal Place of Kilsiness

1263 E. LAS OLAS BLVD., #205 FT. LAUDERDALE, FL 33301 1263 E. LAS OLAS BLVD., #205 FT. LAUDERDALE, FL 33301 US

Current Mailing Address: New Mailing Address:

PO BOX 4249 PO BOX 4249

WINTER PARK, FL 32793 WINTER PARK, FL 32793 US

FEI Number: 59-3745511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOMERSTEIN, MARK 200 E BROWARD BLVD 18TH FLOOR FORT LAUDERDALE, FL 33301 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition

 Name:
 SCHMIDT, CHERYL
 Name:
 SCHMIDT, CHERYL

 Address:
 P.O. BOX 4249
 Address:
 P.O. BOX 4249

City-St-Zip: WINTER PARK, FL 32793 City-St-Zip: WINTER PARK, FL 32793 US

Title: ST () Delete Title: ST (X) Change () Addition

 Name:
 BIGHAM, SHANNON I
 Name:
 BIGHAM, SHANNON I

 Address:
 1263 E. LAS OLAS BLVD., #205
 Address:
 1263 E. LAS OLAS BLVD., #205

Address: 1263 E. LAS OLAS BLVD., #205

City-St-Zip: FT. LAUDERDALE, FL 33301

City-St-Zip: FT. LAUDERDALE, FL 33301 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: BRYAN, JAMES B III Name: BRYAN, JAMES B III

Address: PO BOX 4249 Address: PO BOX 4249

City-St-Zip: WINTER PARK, FL 32793 City-St-Zip: WINTER PARK, FL 32793 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CHERYL SCHMIDT, PRESIDENT P 02/24/2007