2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000046261

Entity Name: VOICEWERKS, INC.

FILED Mar 03, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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500 N. HARBOR CITY BLVD. 500 N. HARBOR CITY BLVD. SUITE B SUITE B

MELBOURNE, FL 39240 MELBOURNE, FL 39235

Current Mailing Address: New Mailing Address:

500 N. HARBOR CITY BLVD.

SUITE B

MELBOURNE, FL 39240

500 N. HARBOR CITY BLVD.

SUITE B

MELBOURNE, FL 39235

FEI Number: 01-0683162 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:

SWAN, DOUGLAS G
201 PLANTATION CLUB DR. APT. #301
MELBOURNE, FL 32940 US
SWAN, DOUGLAS G
3601 CHARDONNAY DRIVE
ROCKLEDGE, FL 32940 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: DOUGLAS G SWAN 03/03/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name:SWAN, DOUGLAS GName:SWAN, DOUGLAS GAddress:201 PLANTATION CLUB DR., APT. #301Address:3601 CHARDONNAY DRIVECity-St-Zip:MELBOURNE, FL 32940City-St-Zip:ROCKLEDGE, FL 32940

Title: VD () Delete Title: () Change () Addition

 Name:
 MUNTEAN, CLINTON L
 Name:

 Address:
 1409 MT. VERNON ST.
 Address:

 City-St-Zip:
 ORLANDO, FL 32803
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 SADOWSKI, DANA L
 Name:

 Address:
 1714 BRUMAN TERRACE
 Address:

 City-St-Zip:
 MELBOURNE, FL 32935
 City-St-Zip:

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

 Name:
 DANIEL, MOWERY R
 Name:

 Address:
 188 SANDLEWOOD TRAIL
 Address:

 City-St-Zip:
 WINTER PARK, FL 32789
 City-St-Zip:

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: DOUGLAS G SWAN P 03/03/2006