

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000049651

Entity Name: ADVICE UNLIMITED, INC.

FILED
May 02, 2006
Secretary of State

Current Principal Place of Business:

1436 GOLFSIDE DRIVE
SEBRING, FL 33872

New Principal Place of Business:

816 GOLFSIDE LN
SEBRING, FL 33872

Current Mailing Address:

1436 GOLFSIDE DRIVE
SEBRING, FL 33872

New Mailing Address:

816 GOLFSIDE LN
SEBRING, FL 33872

FEI Number: 04-3663540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GLISSON, BRIAN
1436 GOLFSIDE DRIVE
SEBRING, FL 33872 US

Name and Address of New Registered Agent:

GLISSON, BRIAN
816 GOLFSIDE LN
SEBRING, FL 33872 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:

05/02/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GLISSON, BRIAN
Address: 1436 GOLFSIDE DRIVE
City-St-Zip: SEBRING, FL 33872

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GLISSON, BRIAN
Address: 816 GOLFSIDE LN
City-St-Zip: SEBRING, FL 33872

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: BRIAN GLISSON

D

05/02/2006

Electronic Signature of Signing Officer or Director

Date