

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060969

Entity Name: NETWIRE, INC.

FILED
Jun 30, 2008
Secretary of State

Current Principal Place of Business:

23250 SEDAWIE DRIVE
BOCA RATON, FL 33433

New Principal Place of Business:

311 S GLEN ARVEN AVENUE
TEMPLE TERRACE, FL 33617

Current Mailing Address:

23250 SEDAWIE DRIVE
BOCA RATON, FL 33433

New Mailing Address:

311 S GLEN ARVEN AVENUE
TEMPLE TERRACE, FL 33617

FEI Number: 03-0440148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYONS, GREGORY F
23250 SEDAWIE DRIVE
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

LYONS, GREGORY F
311 S GLEN ARVEN AVENUE
TEMPLE TERRACE, FL 33617 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:

06/30/2008

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: PASC () Delete
Name: LYONS, GREGORY F
Address: 23250 SEDAWIE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: D () Delete
Name: LYONS, GREGORY F
Address: 23250 SEDAWIE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: VSTD () Delete
Name: MAGGIO, VANESSA L
Address: 23250 SEDAWIE DRIVE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PASC (X) Change () Addition
Name: LYONS, GREGORY F
Address: 311 S GLEN ARVEN AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D (X) Change () Addition
Name: LYONS, GREGORY F
Address: 311 S GLEN ARVEN AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VSTD (X) Change () Addition
Name: LYONS, VANESSA M
Address: 311 S GLEN ARVEN AVENUE
City-St-Zip: TEMPLE TERRACE, FL 33617

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: GREGORY F. LYONS

PASC

06/30/2008

Electronic Signature of Signing Officer or Director

Date