

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000088979

FILED
Mar 27, 2007
Secretary of State

Entity Name: DOCUMENT ADVANTAGE CORPORATION

Current Principal Place of Business:

595 CYPRESS GARDENS BLVD
SUITE 310
WINTER HAVEN, FL 33880

New Principal Place of Business:

6039 CYPRESS GARDENS BLVD
#257
WINTER HAVEN, FL 33884

Current Mailing Address:

595 CYPRESS GARDENS BLVD
SUITE 310
WINTER HAVEN, FL 33880

New Mailing Address:

6039 CYPRESS GARDENS BLVD
#257
WINTER HAVEN, FL 33884

FEI Number: 54-1957971

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WIGGINS, JANA
595 CYPRESS GARDENS BLVD
SUITE 310
WINTER HAVEN, FL 33880 US

Name and Address of New Registered Agent:

WIGGINS, JANA
6039 CYPRESS GARDENS BLVD
#257
WINTER HAVEN, FL 33884 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: JANA WIGGINS

03/27/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WIGGINS, JANA
Address: 595 CYPRESS GARDENS BLVD, STE 310
City-St-Zip: WINTER HAVEN, FL 33880

Title: D () Delete
Name: WIGGINS, DAVID
Address: 595 CYPRESS GARDENS BLVD, STE 310
City-St-Zip: WINTER HAVEN, FL 33880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: WIGGINS, JANA
Address: 6039 CYPRESS GARDENS BLVD #257
City-St-Zip: WINTER HAVEN, FL 33884

Title: D (X) Change () Addition
Name: WIGGINS, DAVID
Address: 6039 CYPRESS GARDENS BLVD #257
City-St-Zip: WINTER HAVEN, FL 33884

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: JANA WIGGINS

DP

03/27/2007

Electronic Signature of Signing Officer or Director

Date