

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000101017

FILED
Apr 27, 2006
Secretary of State

Entity Name: FORECAST FINANCIAL CORPORATION

Current Principal Place of Business:

10859 EMERALD COAST PARKWAY WEST
SUITE 204-330
DESTIN, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

10859 EMERALD COAST PARKWAY WEST
SUITE 204-330
DESTIN, FL 32550 US

New Mailing Address:

FEI Number: 76-0713576 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRAIG, SMITH
10859 EMERALD COAST PARKWAY WEST
SUITE 204-330
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

SMITH, CRAIG G
10859 EMERALD COAST PARKWAY WEST
SUITE 204-330
DESTIN, FL 32550 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: CRAIG SMITH

04/27/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, CRAIG P
Address: 10859 EMERALD COAST PARKWAY W, #204 - 330
City-St-Zip: DESTIN, FL 32550

Title: SVP () Delete
Name: STAHL, KEVIN
Address: 4485 PLAINFIELD AVE SUITE 101B
City-St-Zip: GRAND RAPIDS, MI 49525

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SMITH, CRAIG G
Address: 10859 EMERALD COAST PARKWAY W, #204 - 330
City-St-Zip: DESTIN, FL 32550

Title: VP (X) Change () Addition
Name: SMITH, CATHY L
Address: 10859 EMERALD COAST PARKWAY W, #204-330
City-St-Zip: DESTIN, FL 32550

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: CRAIG SMITH

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date