2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000113135

Entity Name: ACCUDIAL, INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2630 NATURES WAY SQUARE LAKE SOUTH 8409 NORTH MILITARY TRAI PALM BEACH GARDENS, FL 33410

UNIT 109

PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

2630 NATURES WAY SQUARE LAKE SOUTH 8409 NORTH MILITARY TRAI PALM BEACH GARDENS, FL 33410

UNIT 109

PALM BEACH GARDENS, FL 33410

FEI Number: 56-2316687 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KELLEY, CRAIG I ESQ

RICHARD, HASKINS J CFO 1665 PALM BEACH LAKES BLVD SQUARE LAKE SOUTH 8409 NORTH MILITARY TRAI **UNIT 109**

SUITE 1000 WEST PALM BEACH, FL 33401 US PALM BEACH GARDENS, FL 33410 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: RICHARD J HASKINS 04/25/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

KAPLAN, BRIAN MD Name: Name: KAPLAN, BRIAN MD

2630 NATURES WAY 8409 NORTH MILITARY TRAIL UNIT 109 Address: Address:

City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410

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

Name: Name: TERWILLIGER, ROBERT

8409 NORTH MILITARY TRAIL UNIT 109 Address: Address: PALM BEACH GARDENS, FL 33410 City-St-Zip: City-St-Zip:

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

HASKINS, RICHARD J Name: Name:

8409 NORTH MILITARY TRAIL UNIT 109 Address Address: City-St-Zip: City-St-Zip: PALM BEACH GARDENS, FL 33410

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: RICHARD J HASKINS **CFO** 04/25/2008