

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000020684

Entity Name: MIXEDMEDIA DIRECT, INC.

FILED
Aug 27, 2007
Secretary of State

Current Principal Place of Business:

1736 NE 25 AVE
OCALA, FL 34470

New Principal Place of Business:

43 SKYLINE DRIVE
SUITE 3001
LAKE MARY, FL 32746

Current Mailing Address:

1736 NE 25 AVE
OCALA, FL 34470

New Mailing Address:

43 SKYLINE DRIVE
SUITE 3001
LAKE MARY, FL 32746

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HEBEL, DAVID R
1736 NE 25TH AVE
OCALA, FL 34470 US

Name and Address of New Registered Agent:

DAVIS, NICK
43 SKYLINE DRIVE
SUITE 3001
LAKE MARY, FL 32746 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: NICK DAVIS

08/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HEBEL, DAVID
Address: 1736 NE 25 AVE
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: BEASON, VIV
Address: 1736 NE 25 AVE
City-St-Zip: OCALA, FL 34470

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HEBEL, DAVID
Address: 43 SKYLINE DRIVE, SUITE 3001
City-St-Zip: LAKE MARY, FL 32746

Title: D,P (X) Change () Addition
Name: BEASON, VIV
Address: 43 SKYLINE DRIVE, SUITE 3001
City-St-Zip: LAKE MARY, FL 32746

Title: EVP () Change (X) Addition
Name: DAVIS, NICK
Address: 43 SKYLINE DRIVE, SUITE 3001
City-St-Zip: LAKE MARY, FL 32746

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: NICK DAVIS

EVP

08/27/2007

Electronic Signature of Signing Officer or Director

Date