

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000021436

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: UNKNOWN TRUTHS.COM PUBLISHING COMPANY

**Current Principal Place of Business:**

8815 CONROY WINDERMERE RD.  
STE. 190  
ORLANDO, FL 32835

**New Principal Place of Business:**

**Current Mailing Address:**

8815 CONROY WINDERMERE RD.  
STE. 190  
ORLANDO, FL 32835

**New Mailing Address:**

FEI Number: 41-2082362      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CASSIDY, LYNDA L  
8815 CONROY WINDERMERE RD.  
STE. 190  
ORLANDO, FL 32835 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: CASSIDY, LYNDA L  
Address: 8815 CONROY WINDERMERE RD., STE 190  
City-St-Zip: ORLANDO, FL 32835

Title: VTD (X) Delete  
Name: PARKS, WALTER III  
Address: 2660 2ND ST., APT. 1  
City-St-Zip: SANTA MONICA, CA 90407

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition  
Name: CASSIDY, LYNDA L  
Address: 8815 CONROY WINDERMERE RD., STE 190  
City-St-Zip: ORLANDO, FL 32835

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: LYNDA CASSIDY

PRES

04/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date