

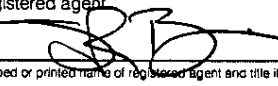
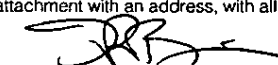
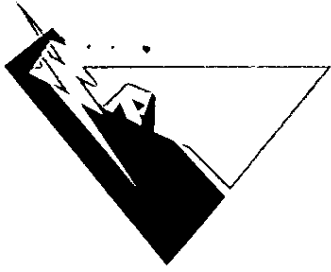


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 13, 2005 8:00 am
Secretary of State

09-13-2005 90002 023 ***150.00

DOCUMENT # P03000069149 1. Entity Name VERTISAN, INC.					
Principal Place of Business 708 HARBOUR POST DRIVE TAMPA, FL 33602				Mailing Address 708 HARBOUR POST DRIVE TAMPA, FL 33602	
2. Principal Place of Business 3421 W Cypress St Suite, Apt. #, etc. Suite 100		3. Mailing Address 3421 W Cypress St Suite, Apt. #, etc. Suite 100		<div style="font-size: 2em; font-weight: bold;">50066675</div>  <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> 08182005 Chg-P CR2E034 (10/03) </div>	
City & State Tampa FL		City & State Tampa FL			
Zip 33607		Zip 33607			
Country USA		Country USA			
4. FEI Number 20-0060001				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent RIOS, SMIDHUM, MANLEY, P.A. 3421 WEST CYPRESS ST TAMPA, FL 33607			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE:  James R. Browning, President 9/7/05 <small>(NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWNING, JAMES 708 HARBOUR POST DRIVE TAMPA, FL 33602		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWNING, JAMES 3421 W Cypress St, Suite 100 Tampa FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  James R. Browning, President 9/7/05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: _____ Daytime Phone #: 813-997-9999		



Vertisan, Inc.

ATTACHMENT
50066675-
#P03000069149

3421 West Cypress St
Suite 100
Tampa, FL 33607
Tel: 813-221-1100
www.vertisan.com

September 7, 2005

TO Whom it MAY Concern:

We Never Received our ANNUAL Report notice.

Please waive the \$400 late fee.

We Greatly Appreciate it!

James R Browning
President.