

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000092591

FILED
Aug 24, 2007
Secretary of State

Entity Name: OVATION DESIGN SOLUTIONS, INC.

Current Principal Place of Business:

1736 ST. JOHN'S BLUFF RD.
JACKSONVILLE, FL 32246 US

New Principal Place of Business:

Current Mailing Address:

1736 ST. JOHN'S BLUFF RD.
JACKSONVILLE, FL 32246 US

New Mailing Address:

9141 WHITE ALDER CT.
SAN DIEGO, CA 92127 US

FEI Number: 20-0174615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POND, BRIAN
1736 ST. JOHN'S BLUFF RD.
JACKSONVILLE, FL 32246 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: POND, BRIAN
Address: 1736 ST. JOHN'S BLUFF RD.
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: SEC () Delete
Name: POND, TIFFANY
Address: 1736 ST. JOHN'S BLUFF RD.
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: CFO () Delete
Name: POND, BRIAN
Address: 1736 ST. JOHN'S BLUFF RD.
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: DIR () Delete
Name: POND, BRIAN
Address: 1736 ST. JOHN'S BLUFF RD.
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: DIR () Delete
Name: POND, TIFFANY
Address: 1736 ST. JOHN'S BLUFF RD.
City-St-Zip: JACKSONVILLE, FL 32246 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: BRIAN POND

CEO

08/24/2007

Electronic Signature of Signing Officer or Director

Date