

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000157138

Entity Name: THE CALEB NETWORK, INC.

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

P.O. BOX 550621
JACKSONVILLE, FL 32255 US

New Principal Place of Business:

10001 SIFTON COURT
JACKSONVILLE, FL 32246 US

Current Mailing Address:

P.O. BOX 550621
JACKSONVILLE, FL 32255 US

New Mailing Address:

10001 SIFTON COURT
JACKSONVILLE, FL 32246 US

FEI Number: 57-1195928

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIFFERT, JOHN F
10001 SIFTON CT
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ALEXANDER, LEE D
Address: P.O. BOX 550621
City-St-Zip: JACKSONVILLE, FL 32255 US

Title: VP () Delete
Name: SHIFFERT, JOHN F
Address: P.O. BOX 550621
City-St-Zip: JACKSONVILLE, FL 32255 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ALEXANDER, LEE D
Address: 924 FLOYD ST.
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: VP (X) Change () Addition
Name: SHIFFERT, JOHN F
Address: 10001 SIFTON COURT
City-St-Zip: JACKSONVILLE, FL 32246 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHN SHIFFERT

VP

04/26/2006

Electronic Signature of Signing Officer or Director

Date