

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033668

Entity Name: RAVEN ANIMATION, INC.

FILED  
Jan 16, 2006  
Secretary of State

## Current Principal Place of Business:

2005 TREE FORK LANE  
LONGWOOD, FL 32750

## New Principal Place of Business:

2005 TREE FORK LANE  
STE 101  
LONGWOOD, FL 32750

## Current Mailing Address:

2005 TREE FORK LANE  
LONGWOOD, FL 32750

## New Mailing Address:

2005 TREE FORK LANE  
STE 101  
LONGWOOD, FL 32750

FEI Number: 30-0538001

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NEFF, JOHN  
175 CROWN POINT CIR.  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

DIFRANCESCO, JOSEPH  
2005 TREE FORK LANE  
STE 101  
LONGWOOD, FL 32750 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: JOSEPH DIFRANCESCO

01/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DIFRANCESCO, JOSEPH  
Address: 280 WEKIVA RD STE 201  
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete  
Name: DIFRANCESCO, BERNADETTE  
Address: 280 WEKIVA SPRINGS RD., SUITE 201  
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete  
Name: GIBILISCO, MICHAEL  
Address: 2005 TRACE FORK LANE STE 113  
City-St-Zip: LONGWOOD, FL 32750

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DIFRANCESCO, JOSEPH  
Address: 2005 TREE FORK LANE STE 101  
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Change ( ) Addition  
Name: DIFRANCESCO, BERNADETTE  
Address: 2005 TREE FORK LANE STE 101  
City-St-Zip: LONGWOOD, FL 32750

Title: D (X) Change ( ) Addition  
Name: GIBILISCO, MICHAEL  
Address: 2005 TREE FORK LANE STE 101  
City-St-Zip: LONGWOOD, FL 32750

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: JOSEPH DIFRANCESCO

D

01/16/2006

Electronic Signature of Signing Officer or Director

Date