

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000057263

Entity Name: OPINION STRATEGIES, INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

4557 BARCLAY
SUITE C
TALLAHASSEE, FL 32309

New Principal Place of Business:

5726 ROANOKE TRAIL
TALLAHASSEE, FL 32312

Current Mailing Address:

4557 BARCLAY
SUITE C
TALLAHASSEE, FL 32309

New Mailing Address:

5726 ROANOKE TRAIL
TALLAHASSEE, FL 32312

FEI Number: 20-0954017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOLFSON, DAVID J
4557 BARCLAY
SUITE C
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

WOLFSON, DAVID J
5726 ROANOKE TRAIL
TALLAHASSEE, FL 32312 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: DAVID J WOLFSON

04/30/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: WOLFSON, DAVID J
Address: 4557 BARCLAY, SUITE C
City-St-Zip: TALLAHASSEE, FL 32309

Title: VSD () Delete
Name: WOLFSON, CARI A
Address: 4557 BARCLAY, SUITE C
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: WOLFSON, DAVID J
Address: 5726 ROANOKE TRAIL
City-St-Zip: TALLAHASSEE, FL 32312

Title: VSD (X) Change () Addition
Name: WOLFSON, CARI A
Address: 5726 ROANOKE TRAIL
City-St-Zip: TALLAHASSEE, FL 32312

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: DAVID J WOLFSON

PTD

04/30/2006

Electronic Signature of Signing Officer or Director

Date