

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062050

Entity Name: RIGHT DIRECTION, INC.

FILED
Jan 07, 2006
Secretary of State

Current Principal Place of Business:

5656 STRAWBERRY LAKES CIRCLE
LAKE WORTH, FL 33463

New Principal Place of Business:

Current Mailing Address:

5656 STRAWBERRY LAKES CIRCLE
LAKE WORTH, FL 33463

New Mailing Address:

FEI Number: 20-0252835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, JAYNE M
1801 SOUTH FEDERAL HIGHWAY
SUITE 238
DELRAY BEACH, FL 33483 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: PTC () Delete
Name: ROCKETT, JAMES M
Address: 5656 STRAWBERRY LAKES CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

Title: SD () Delete
Name: STEWART, JAYNE M
Address: 1801 SOUTH FEDERAL HIGHWAY SUITE 238
City-St-Zip: DELRAY BEACH, FL 33483

Title: D () Delete
Name: JACK, BARBARA
Address: 806 DATE PALM
City-St-Zip: LARGO, FL 33778

Title: VMD () Delete
Name: ROCKETT, NANCY L
Address: 5656 STRAWBERRY LAKES CIRCLE
City-St-Zip: LAKE WORTH, FL 33463

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:

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: JAMES M ROCKETT

PTCD

01/07/2006

Electronic Signature of Signing Officer or Director

Date