

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000068065

Entity Name: SITEMONGER, INC.

FILED
Apr 22, 2009
Secretary of State

Current Principal Place of Business:

4795 E BOW-N-ARROW LOOP
INVERNESS, FL 34452

New Principal Place of Business:

Current Mailing Address:

4795 E BOW-N-ARROW LOOP
INVERNESS, FL 34452

New Mailing Address:

FEI Number: 20-1067855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINBURN, LANCE
4795 E BOW-N-ARROW LOOP
INVERNESS, FL 34452 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: D () Delete
Name: WINBURN, LANCE
Address: 4795 E BOW-N-ARROW LOOP
City-St-Zip: INVERNESS, FL 34452

Title: O () Delete
Name: WINBURN, CONNIE M OFFICER
Address: 4795 EAST BOW-N-ARROW LOOP
City-St-Zip: INVERNESS, FL 34452 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WINBURN, LANCE P
Address: 4795 E BOW-N-ARROW LOOP
City-St-Zip: INVERNESS, FL 34452

Title: O (X) Change () Addition
Name: WINBURN, CONNIE M
Address: 4795 EAST BOW-N-ARROW LOOP
City-St-Zip: INVERNESS, FL 34452 US

Title: O () Change (X) Addition
Name: WINBURN, MYLES E
Address: 4795 EAST BOW-N-ARROW LOOP
City-St-Zip: INVERNESS, FL 34452 US

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: CONNIE WINBURN

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04/22/2009

Electronic Signature of Signing Officer or Director

Date