

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000080133

FILED
Sep 15, 2008
Secretary of State

Entity Name: ATTITUDE LATITUDE, INC.

Current Principal Place of Business:

1 NE 1ST AVENUE
#211
OCALA, FL 34470

New Principal Place of Business:

2050 SE 73RD LOOP
OCALA, FL 34480

Current Mailing Address:

2050 SE 73RD LOOP
OCALA, FL 34480

New Mailing Address:

FEI Number: 20-1152265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE
SUITE 125
CORAL GABLES, FL 33146 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: USHER, JOHN
Address: 3681 7TH STREET
City-St-Zip: OCALA, FL 34470

Title: SD () Delete
Name: USHER, DEBORAH
Address: 3681 7TH STREET
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: DEBORAH USHER

SD

09/15/2008

Electronic Signature of Signing Officer or Director

Date