2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000087790

Name:

Address:

City-St-Zip:

FIGLOW, PETER P

108 CHERRY BLOSSOM LANE

THE VILLAGES, FL 32159 US

Entity Name: CLASS 3 SOLUTIONS, INC.

FILED Apr 12, 2007 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	OGRESS RD. G, FL 34748	US			
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
	OGRESS RD. G, FL 34748	US			
FEI Number: 20-1501815 FEI		FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
The above	e of Florida.		ne purpose of changing its registered	d office or registered agent, or both,	
	Electro	nic Signature of Registered	Agent	Date	
Election Car	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	NICHOLS, JEA 36525 TRIPP (Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	NICHOLS, STE 36525 TRIPP		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	SEC () Delete	Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JEANMARIE NICHOLS PRES 04/12/2007