

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100195

Entity Name: INFORMATION LOCATE INC.

FILED
Jan 26, 2007
Secretary of State

Current Principal Place of Business:

P.O. BOX 490
ZEPHYRHILLS, FL 33539

New Principal Place of Business:

4323 5TH STREET
ZEPHYRHILLS, FL 33542

Current Mailing Address:

P.O. BOX 490
ZEPHYRHILLS, FL 33539

New Mailing Address:

FEI Number: 34-2000461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTSON, TOMMY L
P. O. BOX 490
ZEPHYRHILLS, FL 33539 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: P/S () Delete
Name: ROBERTSON, DEBRA
Address: P.O. BOX 490
City-St-Zip: ZEPHYRHILLS, FL 33539

Title: T/D (X) Delete
Name: ROBERTSON, TOMMY
Address: P O BOX 490
City-St-Zip: ZEPHYRHILLS, FL 33539

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ROBERTSON, TOMMY
Address: P.O. BOX 490
City-St-Zip: ZEPHYRHILLS, FL 33539

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: TOMMY ROBERTSON

PSTD

01/26/2007

Electronic Signature of Signing Officer or Director

Date