

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000137010

FILED
Jan 19, 2007
Secretary of State

Entity Name: OMNIDIRECTIONAL ENDEAVORS INC.

Current Principal Place of Business:

1340 OLYMPIA PARK CIRCLE
OCOE, FL 34761 US

New Principal Place of Business:

14743 STONEBRIAR WAY
ORLANDO, FL 32826 US

Current Mailing Address:

1340 OLYMPIA PARK CIRCLE
OCOE, FL 34761 US

New Mailing Address:

14743 STONEBRIAR WAY
ORLANDO, FL 32826 US

FEI Number: 56-2488463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITAKER, MARK A
4860 OLD OAK TRAIL
ST. CLOUD, FL 34771 US

Name and Address of New Registered Agent:

CONKLIN, JIM P
14743 STONEBRIAR WAY
ORLANDO, FL 32826 US

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: JIM CONKLIN

01/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CONKLIN, JIM
Address: 1340 OLYMPIA PARK CIRCLE
City-St-Zip: OCOE, FL 34761 US

Title: VP () Delete
Name: WHITAKER, MARK A
Address: 4860 OLD OAK TRAIL
City-St-Zip: ST. CLOUD, FL 34771 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CONKLIN, JIM
Address: 14743 STONEBRIAR WAY
City-St-Zip: ORLANDO, FL 32826 US

Title: VP (X) Change () Addition
Name: CLEVER, LORI L
Address: 14743 STONEBRIAR WAY
City-St-Zip: ORLANDO, FL 32826 US

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: JIM CONKLIN

P

01/19/2007

Electronic Signature of Signing Officer or Director

Date