

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000144080

Entity Name: RELIONET, INC.

FILED
Jan 23, 2006
Secretary of State

Current Principal Place of Business:

1025 MILLER DR - STE 105
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

1025 MILLER DR - STE 105
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 20-1784959

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARNES, ROBERT L
2740 BAYVIEW DR
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

KARNES, ROBERT L
14432 LAKE YALE RD
UMATILLA, FL 32784 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: ROBERT L KARNES

01/23/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KARNES, ROBERT L
Address: 2740 BAYVIEW DR
City-St-Zip: EUSTIS, FL 32726

Title: S () Delete
Name: KARNES, AMY J
Address: 2740 BAYVIEW DR
City-St-Zip: EUSTIS, FL 32726

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KARNES, ROBERT L
Address: 14432 LAKE YALE RD
City-St-Zip: UMATILLA, FL 32784

Title: S (X) Change () Addition
Name: KARNES, AMY J
Address: 14432 LAKE YALE RD
City-St-Zip: UMATILLA, FL 32784

Title: D () Change (X) Addition
Name: HAISTEN, STEVEN T
Address: 1019 BLACK WILLOW DR
City-St-Zip: OVIEDO, FL 32765

Title: D () Change (X) Addition
Name: KARNES, CHRISTOPHER L
Address: 6975 NEW OXFORD RD
City-St-Zip: HARRISBURG, PA 17112

Title: D () Change (X) Addition
Name: KARNES, RICHARD L
Address: HC 36 BOX 353B
City-St-Zip: TALLMANSVILLE, WV 26237

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: AMY J KARNES

S

01/23/2006

Electronic Signature of Signing Officer or Director

Date