

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000145611

FILED
Jan 13, 2009
Secretary of State

Entity Name: RIGHT BRAIN LEFT BRAIN INTERACTIVE, INC.

Current Principal Place of Business:

663 AVENUE I NW
WINTER HAVEN, FL 33881

New Principal Place of Business:

8360 PONTALUNA ROAD
NUNICA, MI 49448

Current Mailing Address:

1101 MIRANDA LANE
KISSIMMEE, FL 347410769

New Mailing Address:

FEI Number: 20-1780284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOVALIC, LESLIE
663 AVENUE I NW
WINTER HAVEN, FL 33881 US

Name and Address of New Registered Agent:

BRYANT, IMRE SHAWN
1000 SIENA PARK BLVD, WEST
CELEBRATION, FL 34747 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: IMRE SHAWN BRYANT

01/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: KOVALIC, LESLIE
Address: 663 AVENUE I NW
City-St-Zip: WINTER HAVEN, FL 33881 US

Title: TD () Delete
Name: BRYANT, SHAWN
Address: 663 AVENUE I NW
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: KOVALIC, LESLIE
Address: 8360 PONTALUNA ROAD
City-St-Zip: NUNICA, MI 49448 US

Title: TD (X) Change () Addition
Name: BRYANT, SHAWN
Address: 1000 SIENA PARK BLVD, WEST
City-St-Zip: CELEBRATION, FL 34747

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: LESLIE KOVALIC

PRES

01/13/2009

Electronic Signature of Signing Officer or Director

Date