

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000036969

Entity Name: IT'S MY CHOICE ONLINE, INC.

FILED  
Apr 23, 2008  
Secretary of State

## Current Principal Place of Business:

5334 LAKE LECLARE ROAD  
LUTZ, FL 33558 US

## New Principal Place of Business:

16127 ARMISTEAD LANE  
ODESSA, FL 33556 US

## Current Mailing Address:

5334 LAKE LECLARE ROAD  
LUTZ, FL 33558 US

## New Mailing Address:

16127 ARMISTEAD LANE  
ODESSA, FL 33556 US

FEI Number: 20-2549193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUGHES, JUDY S  
5334 LAKE LECLARE ROAD  
LUTZ, FL 33558 US

## Name and Address of New Registered Agent:

HUGHES, JUDY S  
16127 ARMISTEAD LANE  
ODESSA, FL 33556 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: JUDY S. HUGHES

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DIR ( ) Delete  
Name: HUGHES, JUDY S  
Address: 5334 LAKE LECLARE ROAD  
City-St-Zip: LUTZ, FL 33558 US

Title: DIR ( ) Delete  
Name: O'NEAL, HENRY J DR.  
Address: P. O. BOX 262016  
City-St-Zip: TAMPA, FL 33685

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition  
Name: HUGHES, JUDY S  
Address: 16127 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUDY S. HUGHES

DIR

04/23/2008

Electronic Signature of Signing Officer or Director

Date