

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000055553

Entity Name: JOHN PATRICK MEDIA, INC.

FILED
Apr 15, 2007
Secretary of State

Current Principal Place of Business:

102 FOREST BREEZE AVE.
BRANDON, FL 33511 US

New Principal Place of Business:

810 KING LEON WAY
SUN CITY CENTER, FL 33573 US

Current Mailing Address:

102 FOREST BREEZE AVE.
BRANDON, FL 33511 US

New Mailing Address:

P.O. BOX 224
OKAHUMPKA, FL 34762 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BURNS, WILLIAM
102 FOREST BREEZE AVE.
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

BURNS, WILLIAM
810 KING LEON WAY
SUN CITY CENTER, FL 33573 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:

04/15/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BURNS, WILLIAM
Address: 102 FOREST BREEZE AVE.
City-St-Zip: BRANDON, FL 33511 US

Title: VP () Delete
Name: BURNS, CLAIRECE
Address: 102 FOREST BREEZE AVE.
City-St-Zip: BRANDON, FL 33511 US

Title: SEC () Delete
Name: GENTRY, CAROL
Address: HWY 33
City-St-Zip: OKAHUMPKA, FL 34762 US

Title: TRE () Delete
Name: GENTRY, CAROL
Address: HWY 33
City-St-Zip: OKAHUMPKA, FL 34762 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BURNS, WILLIAM
Address: 810 KING LEON WAY
City-St-Zip: SUN CITY CENTER, FL 33573 US

Title: VP (X) Change () Addition
Name: BURNS, CLAIRECE
Address: 810 KING LEON WAY
City-St-Zip: SUN CITY CENTER, FL 33573 US

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

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: WILLIAM J BURNS

P

04/15/2007

Electronic Signature of Signing Officer or Director

Date