

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90325 049 ***150.00

DOCUMENT # P05000061807

1. Entity Name
NETFLEXION, INC.



Principal Place of Business
1262 DR. MARTIN LUTHER KING JR. ST NORTH
ST PETERSBURG, FL 33705

Mailing Address
1262 DR. MARTIN LUTHER KING JR. ST NORTH
ST PETERSBURG, FL 33705

50010276



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04052006

Chg-P

CR2E034 (11/05)

City & State

City & State

4. FEI Number

20-2269270

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRAUN, RONALD W
1262 DR. MARTIN LUTHER KING JR. ST NORTH
ST PETERSBURG, FL 33705

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME BRAUN, RYAN W.
STREET ADDRESS 321 BELT AVE #102
CITY-ST-ZIP ST LOUIS, MO 63112

TITLE P/D ☒ Change ☐ Addition
NAME
STREET ADDRESS 4814 NW 44th AVE #103
CITY-ST-ZIP GAINESVILLE, FL 32608

TITLE D ☐ Delete
NAME BRAUN, BONNIE A
STREET ADDRESS 1163 SNELL ISLE BLVD NE
CITY-ST-ZIP ST PETERSBURG, FL 33704

TITLE V/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME BRAUN, RONALD W
STREET ADDRESS 1262 DR. MARTIN LUTHER KING JR. ST NORTH
CITY-ST-ZIP ST PETERSBURG, FL 33705

TITLE S/D ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V/D ☐ Change ☒ Addition
NAME BRAUN, ROBYN A
STREET ADDRESS 1217 NW 55th STREET #17
CITY-ST-ZIP GAINESVILLE, FL 32605

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Ronald W. Braun RONALD W. BRAUN

4/5/06

(22) 642-5102

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #