

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000067483

Entity Name: I7 CORP

FILED
May 19, 2008
Secretary of State

Current Principal Place of Business:

1511 N. WESTSHORE BLVD.
SUITE 400
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

1511 N. WESTSHORE BLVD.
SUITE 400
TAMPA, FL 33607

New Mailing Address:

FEI Number: 20-2913925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALKER, GARY ESQ
202 S. ROME AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: SCHLAIFER, DAVID A
Address: 371 CHANNELSIDE WKWY
City-St-Zip: TAMPA, FL 33602

Title: VTD () Delete
Name: GRUBBS, ANDREW
Address: 420 GOLDEN ELM DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: D () Delete
Name: UMBERGER, STEVE
Address: 118 WEST ADAMS STREET, SUITE 600
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: SCHLAIFER, DAVID A
Address: 103 MARTINIQUE AVE
City-St-Zip: TAMPA, FL 33606

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 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: DAVID A SCHLAIFER

PSD

05/19/2008

Electronic Signature of Signing Officer or Director

Date