

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000127142

FILED  
Apr 11, 2006  
Secretary of State

Entity Name: PROXYCON INFORMATION TECHNOLOGY CORP

**Current Principal Place of Business:**

8690 LAUREL DRIVE  
PINELLAS PARK, FL 33782

**New Principal Place of Business:**

**Current Mailing Address:**

8690 LAUREL DRIVE  
PINELLAS PARK, FL 33782

**New Mailing Address:**

P.O. BOX 76276  
SAINT PETERSBURG, FL 33734

FEI Number: 20-4252619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SAMOUNTRY, POWELL  
8690 LAUREL DRIVE  
PINELLAS PARK, FL 33782 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SAMOUNTRY, POWELL  
Address: 8690 LAUREL DRIVE  
City-St-Zip: PINELLAS PARK, FL 33782

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: POWELL SAMOUNTRY

P

04/11/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date