2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024575

Entity Name: PROMPT PROCESSING & NOTARY SERVICES, INC.

FILED May 01, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

2851 GOLDEN POND BLVD.

ORANGE PARK, FL 32073

3030 PIEDMONT MANOR DR
ORANGE PARK, FL 32065

Current Mailing Address: New Mailing Address:

2851 GOLDEN POND BLVD.

ORANGE PARK, FL 32073

3030 PIEDMONT MANOR DR
ORANGE PARK, FL 32065

FEI Number: 20-4331939 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

JONES, CLAYBORN E
8439 EVEREST DRIVE
JACKSONVILLE, FL 32244
US
JONES, CLAYBORN E
3030 PIEDMONT MANOR DR
ORANGE PARK, FL 32073
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: 05/01/2007

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: P () Delete Title: O (X) Change () Addition

 Name:
 SANTIAGO JONES, JESSICA M
 Name:
 SANTIAGO JONES, JESSICA M

 Address:
 8439 EVEREST DRIVE
 Address:
 3030 PIEDMONT MANOR DR

 City-St-Zip:
 JACKSONVILLE, FL 32244
 City-St-Zip:
 ORANGE PARK, FL 32065

() Delete Title: Title: (X) Change () Addition Name: JONES, CLAYBORN E Name: JONES, CLAYBORN E 8439 EVEREST DRIVE Address: 3030 PIEDMONT MANOR DR Address: JACKSONVILLE, FL 32244 ORANGE PARK, FL 32065 City-St-Zip: 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: CLAYBORN E. JONES O 05/01/2007