

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000035333

FILED  
Apr 05, 2012  
Secretary of State

Entity Name: STORYBOARD CONSULTING, INC.

**Current Principal Place of Business:**

10757 CASTLE OAK DR.  
BOYNTON BEACH, FL 33473 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 741831  
BOYNTON BEACH, FL 33474 US

**New Mailing Address:**

FEI Number: 20-5047403      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FORM-A-CORP, INC.  
100 VILLAGE SQUARE CROSSING  
SUITE 103  
PALM BEACH GARDENS, FL 33410 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

**OFFICERS AND DIRECTORS:**

Title: D,P  
Name: GIBELLI, MARK  
Address: PO BOX 741831  
City-St-Zip: BOYNTON BEACH, FL 33474 US

Title: D,VP  
Name: HOLLAND, HANS  
Address: PO BOX 741831  
City-St-Zip: BOYNTON BEACH, FL 33474 US

Title: T  
Name: HOLLAND, LAUREN  
Address: PO BOX 741831  
City-St-Zip: BOYNTON BEACH, FL 33474 US

Title: S  
Name: GIBELLI, MONIQUE  
Address: PO BOX 741831  
City-St-Zip: BOYNTON BEACH, FL 33474 US

I hereby 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 all other like empowered.

SIGNATURE: MARK GIBELLI

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

MR.

04/05/2012

\_\_\_\_\_ Date