

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000038367

Entity Name: ECHO REPORTING, INC.

FILED
May 04, 2008
Secretary of State

Current Principal Place of Business:

210 SOUTH MOODY AVENUE
TAMPA, FL 33609 US

New Principal Place of Business:

316 25TH AVENUE NORTH
ST. PETERSBURG, FL 33704 US

Current Mailing Address:

P.O. BOX 360115
TAMPA, FL 33673

New Mailing Address:

FEI Number: 22-3928819

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRASSER, KIMBERLY L
210 SOUTH MOODY AVENUE
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

STRASSER, KIMBERLY L
316 25TH AVENUE NORTH
ST. PETERSBURG, FL 33704 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:

05/04/2008

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
Name: STRASSER, KIMBERLY L
Address: 210 SOUTH MOODY AVENUE
City-St-Zip: TAMPA, FL 33609 US

Title: D () Delete
Name: STRASSER, KIMBERLY L
Address: 210 SOUTH MOODY AVENUE
City-St-Zip: TAMPA, FL 33609 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STRASSER, KIMBERLY L
Address: 316 25TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33704 US

Title: D (X) Change () Addition
Name: STRASSER, KIMBERLY L
Address: 316 25TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33704 US

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: KIMBERLY STRASSER

P

05/04/2008

Electronic Signature of Signing Officer or Director

Date