2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000052306

Entity Name: INNOVATION HR, INC.

PARSON, ROBERT S

FAIRFAX, VA 22030

10491 COURTNEY DR

Name:

Address:

City-St-Zip:

FILED Apr 24, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1701 SUNSET AVENUE SUITE 208 ROCKY MOUNT, NC 27804 **Current Mailing Address: New Mailing Address:** 1701 SUNSET AVENUE SUITE 208 ROCKY MOUNT, NC 27804 FEI Number: 20-4746114 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: WORTMAN, J. JOHN 200 EXECUTIVE WAY SUITE 210 PONTE VEDRA BEACH, FL 32082 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DCFO () Delete Title: () Change () Addition KEENAN, STEPHEN T Name: Name: 57 MOCKINGBIRD LANE Address: Address: City-St-Zip: ROCKY MOUNT, NC 27804 City-St-Zip: Title: Title: () Delete () Change () Addition Name: BELLAMY, REVEL Name: 1620 WALDEN POND LANE Address: Address: WAXHAW, NC 28172 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition WORTMAN, J. JOHN Name: Name: 91 SAN JUAN DRIVE UNIT C2 Address: Address: City-St-Zip: PONTE VEDRA BEACH, FL 32082 City-St-Zip: Title: **DCFO** () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEPHEN T. KEENAN DCEO 04/24/2007