2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007
Secretary of State

DOCUMENT# P06000099599

Entity Name: CERITY SOLUTIONS, INC.

Current Principal Place of Business:

4905 BELFORT ROAD, SUITE 110
JAKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

4905 BELFORT ROAD, SUITE 110
JAKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 90-0281363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERSONS, ROBERT B JR.
2215 SOUTH THIRD STREET, SUITE 101
JACKSONVILLE BEACH, FL 32250 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: D ( ) Delete
Name: MACE, DARREN S
Address: 48 JACKSON AVE.
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D ( ) Delete
Name: MASSEY, DARIAN M SR.
Address: 6906 ARIEL DRIVE
City-St-Zip: JACKSONVILLE, FL 32277

Title: D ( ) Delete
Name: WENZELL, CHRISTOPHER L
Address: 2751 APOLLO COURT
City-St-Zip: MIDDLERBURG, FL 32068

Title: D ( ) Delete
Name: FLANAGAN, KERRY
Address: 1031 BELLAMY ROAD
City-St-Zip: MELROSE, FL 32666

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: DARREN MACE D 04/27/2007

Electronic Signature of Signing Officer or Director Date