2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 01, 2007
Secretary of State

DOCUMENT# P06000116321

Entity Name: PSYCHIC GUIDANCE NETWORK, INC.

Current Principal Place of Business:

4250 ALAFAYA TRAIL
SUITE 212-106
OVIEDO, FL 32765 US

New Principal Place of Business:

Current Mailing Address:

4250 ALAFAYA TRAIL
SUITE 212-106
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 41-2237708 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MANN, DAVID
4250 ALAFAYA TRAIL
SUITE 212-106
OVIEDO, FL 32765 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

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: DIR ( ) Delete
Name: MCCARTHY, JAMES A III
Address: 4250 ALAFAYA TRAIL, SUITE 212-106
City-St-Zip: OVIEDO, FL 32765 US

Title: DIR ( ) Delete
Name: CANNON, AMY
Address: 4250 ALAFAYA TRAIL, SUITE 212-106
City-St-Zip: OVIEDO, FL 32765 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DIR ( ) Change (X) Addition
Name: SANDERSON, PAUL D
Address: 4250 ALAFAYA TRAIL, SUITE 212-106
City-St-Zip: OVIEDO, FL 32765 US

Title: DIR ( ) Change (X) Addition
Name: MANN, DAVID L
Address: 4250 ALAFAYA TRAIL, SUITE 212-106
City-St-Zip: OVIEDO, FL 32765 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: DAVID MANN DIR 08/01/2007

Electronic Signature of Signing Officer or Director — Date