## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000001795

Entity Name: TXTVOX, INC.

FILED Apr 04, 2008 Secretary of State

•		,				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	MOORE ROA TON, FL 3348					
Current Mailing Address:			New Maili	New Mailing Address:		
	MOORE ROA TON, FL 3348					
FEI Number	: 20-8209285	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	d Address of C	Current Registered Agent:	Name and	Address o	f New Registered Agent:	
	HILIP MOORE ROA TON, FL 3348					
	e named entity e of Florida.	submits this statement for the p	purpose of changing i	its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electror	nic Signature of Registered Ag	ent		Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	P ( NADEL, PHILIF 945 CLINT MO BOCA RATON,	ORE ROAD	Title: Name: Address: City-St-Zip:		(X) Change()Addition LIP L MOORE ROAD N, FL 33487 US	
Title: Name: Address: City-St-Zip:	VP ( DIAMOND, WIL 945 CLINT MO BOCA RATON,	ORE ROAD	Title: Name: Address: City-St-Zip:		(X) Change()Addition VILLIAM F MOORE ROAD N, FL 33487 US	
Title: Name: Address: City-St-Zip:	SEC (X NADEL, PHILIF 945 CLINT MO BOCA RATON,	ORE ROAD	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zin:	TRE (X NADEL, PHILIF 945 CLINT MO BOCA RATON	ORE ROAD	Title: Name: Address: City-St-Zin:		( ) Change ( ) Addition	

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: PHILIP L. NADEL PSTD 04/04/2008