

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000049456

FILED
Jan 04, 2008
Secretary of State

Entity Name: ENTRUST CORPORATION

Current Principal Place of Business:

644 CESERY BLVD.
SUITE 310
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

644 CESERY BLVD.
SUITE 310
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 20-8879943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, JOHN D JR
644 CESERY BLVD
SUITE 310
JACKSONVILLE, FL 32211 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: P () Delete
Name: ADAMS, JOHN D JR
Address: 7805 LAURA ST N
City-St-Zip: JACKSONVILLE, FL 32208

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ADAMS, JOHN D PRES
Address: 7805 LAURA ST N
City-St-Zip: JACKSONVILLE, FL 32208

Title: CFO () Change (X) Addition
Name: ADAMS, STEPHANIE E CFO
Address: 7805 LAURA ST N
City-St-Zip: JACKSONVILLE, FL 32208

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: JOHN D. ADAMS, JR.

PRES

01/04/2008

Electronic Signature of Signing Officer or Director

Date