## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P07000052202

Entity Name: 321 COMMUNICATIONS, INC.

FILED Aug 01, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 23110 STATE RD 54 NUMBER 307 LUTZ, FL 33549 **Current Mailing Address: New Mailing Address:** 23110 STATE RD 54 NUMBER 307 LUTZ, FL 33549 FEI Number: 26-0512487 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: FRANCO, ANGIE M 3048 COBBLESTONE DR PACE, FL 32571 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition WATSON, CHRISTOPHER S WATSON, CHRISTOPHER S Name: Name: 3043 CONCHO DRIVE 612 CLUBHOUSE TERRACE Address: Address: City-St-Zip: PENSACOLA, FL 32507 US City-St-Zip: PERDIDO KEY, FL 32507 US Title: Title: (X) Change ( ) Addition ( ) Delete SOLT, LEONARD I Name: Name: SOLT, LEONARD I 3313 RUSSETT PLACE 3313 RUSSETT PLACE Address: Address: LAND O LAKES, FL 34639 US LAND O LAKES, FL 34638 US City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition INSIXIENGMAY, PHETSAVANG Name: Name: 1060 MORNING LIGHT RD Address: Address: City-St-Zip: JACKSONVILLE, FL 32218 FL City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition JONES, JJKAREEM JONES, JJKAREEM Name: Name: Address: 23110 STATE RD 54 Address: 12127 SUNCHASE DRIVE City-St-Zip: City-St-Zip: LUTZ, FL 33549 JACKSONVILLE, FL 32246

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: LEONARD I. SOLT ST 08/01/2008