2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000052202

Entity Name: 321 COMMUNICATIONS, INC.

FILED Feb 25, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
3313 RUSSETT PLACE LAND O'LAKES, FL 34638			24814 STATE ROAD LUTZ, FL 33559	24814 STATE ROAD 54 LUTZ, FL 33559	
Current Mailing Address:			New Mailing Address:		
3313 RUSSETT PLACE LAND O'LAKES, FL 34638			24814 STATE ROAD 54 LUTZ, FL 33559		
FEI Number	:: 26-0512487 FEI N	umber Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
	SETT PLACE	JS			
	e named entity submit e of Florida.	this statement for the	purpose of changing its register	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electronic Sigr	ature of Registered Ag	ent	Date	
Election Ca	mpaign Financing Trust	Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P () Delete WATSON, CHRISTOPH 612 CLUBHOUSE TERI PERDIDO KEY, FL 329	RACE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () Delete SOLT, LEONARD I 3313 RUSSETT PLACE LAND O LAKES, FL 34		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	me: INSIXIENGMÀÝ, PHETSAVANG dress: 1060 MORNING LIGHT RD		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () Delete JONES, JJKAREEM 12127 SUNCHASE DRI JACKSONVILLE, FL 32		Title: Name: Address: City-St-Zip:	() 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: LENNY SOLT ST 02/25/2009