

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000100963

Entity Name: URBAN LIVING MEDIA GROUP, INC.

FILED  
Sep 15, 2008  
Secretary of State

## Current Principal Place of Business:

1401 RIVER PL., SUITE 1209  
JACKSONVILLE, FL 32207

## New Principal Place of Business:

9838 OLD BAYMEADOWS RD  
SUITE 231  
JACKSONVILLE, FL 32256

## Current Mailing Address:

1401 RIVER PL., SUITE 1209  
JACKSONVILLE, FL 32207

## New Mailing Address:

9838 OLD BAYMEADOWS RD  
SUITE 231  
JACKSONVILLE, FL 32256

FEI Number: 26-0830584

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCNAIR, TROY  
1401 RIVER PL., SUITE 1209  
JACKSONVILLE, FL 32207 US

## Name and Address of New Registered Agent:

MCNAIR, TROY  
9838 OLD BAYMEADOWS RD  
SUITE 231  
JACKSONVILLE, FL 32256 US

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:

09/15/2008

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: PDS ( ) Delete  
Name: MCNAIR, TROY  
Address: 1401 RIVER PL., SUITE 1209  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD ( ) Delete  
Name: TSEGAL, RITA  
Address: 1401 RIVER PL., SUITE 1209  
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD ( ) Delete  
Name: TYLER, BARBRA  
Address: 11405 TRACI LYNN DR.  
City-St-Zip: JACKSONVILLE, FL 32219

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MCNAIR, TROY  
Address: 9838 OLD BAYMEADOWS RD, SUITE 231  
City-St-Zip: JACKSONVILLE, FL 32256

Title: VST (X) Change ( ) Addition  
Name: BROWN, CHARLEYNE  
Address: 9838 OLD BAYMEADOWS RD, SUITE 231  
City-St-Zip: JACKSONVILLE, FL 32256

Title: V (X) Change ( ) Addition  
Name: BAKER, ROMONA  
Address: 9838 OLD BAYMEADOWS RD, SUITE 231  
City-St-Zip: JACKSONVILLE, FL 32256

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: CHARLEYNE BROWN

V

09/15/2008

Electronic Signature of Signing Officer or Director

Date