2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000027716

Entity Name: NETWORK 32 AND ASSOCIATES INCORPORATED

FILED Apr 04, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5055 SOUTH DALE MABRY HIGHWAY 2920 EAST COLUMBUS DRIVE

APT 432 UNIT 1

TAMPA, FL 33611 US TAMPA, FL 33605 US

Current Mailing Address: New Mailing Address:

5055 SOUTH DALE MABRY HIGHWAY 2920 EAST COLUMBUS DRIVE APT 432

UNIT 1

TAMPA, FL 33605 US

FEI Number: 06-1838060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

PERRY, VIRGIL N PERRY, VIRGIL N

5055 SOUTH DALE MABRY HIGHWAY 2920 EAST COLUMBUS DRIVE

APT 432 UNIT 1 TAMPA, FL 33611 US TAMPA, FL 33605 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: 04/04/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

US

OFFICERS AND DIRECTORS:

TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition PERRY, VIRGIL N PERRY PERRY, VIRGIL N PERRY Name: Name:

5055 SOUTH DALE MABRY HIGHWAY, APT 432 2920 EAST COLUMBUS DRIVE Address: Address:

City-St-Zip: TAMPA, FL 33611 City-St-Zip: **TAMPA FL 33605**

VΡ Title: VΡ Title: () Delete (X) Change () Addition Name: PERRY, KYLE K Name:

PERRY, KYLE K 5055 SOUTH DALE MABRY HIGHWAY, APT 432 2920 EAST COLUMBUS DRIVE Address: Address:

TAMPA, FL 33611 US TAMPA, FL 33605 US City-St-Zip: City-St-Zip:

() Delete Title: Title: () Change () Addition

YOUNGBLOOD, MARVIN SR. Name: Name: 3611 SHADOWLAWN STREET Address: Address City-St-Zip: TAMPA, FL 33610 US City-St-Zip:

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.

Ρ SIGNATURE: VIRGIL N PERRY 04/04/2009