

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000065118

FILED
Feb 23, 2010
Secretary of State

Entity Name: ERUDIO, INC.

Current Principal Place of Business:

5151 COUNTRY LAKES DRIVE
FORT MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

5151 COUNTRY LAKES DRIVE
FORT MYERS, FL 33905 US

New Mailing Address:

FEI Number: 27-0665067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, JAMES M
5151 COUNTRY LAKES DRIVE
FORT MYERS, FL 33905 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
Name: JONES, JAMES M
Address: 5151 COUNTRY LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33905 US

Title: VP
Name: STALLWOOD, SAMANTHA J
Address: 5151 COUNTRY LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33905 US

Title: T
Name: JONES, JAMES M
Address: 5151 COUNTRY LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33905 US

Title: S
Name: STALLWOOD, SAMANTHA J
Address: 5151 COUNTRY LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33905 US

Title: DIR
Name: JONES, JAMES M
Address: 5151 COUNTRY LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33905 US

Title: DIR
Name: STALLWOOD, SAMANTHA J
Address: 5151 COUNTRY LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33905 US

I hereby 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 all other like empowered.

SIGNATURE: SAMANTHA J. STALLWOOD

VP

02/23/2010

Electronic Signature of Signing Officer or Director

Date