2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000053695

Entity Name: ADVENTURE VENTURES OF NORTH FLORIDA, INC.

FILED Feb 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

100 SW 75 ST STE 205 4907 NW 43RD STREET GAINESVILLE, FL 32607 US

SUITE F

GAINESVILLE, FL 32606 US

Current Mailing Address: New Mailing Address:

4907 NW 43RD STREET 100 SW 75 ST STE 205

GAINESVILLE, FL 32607 US SUITE F

GAINESVILLE, FL 32606 US

FEI Number: 59-3195421 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:

PUGH, MERRILL HOWARD, AMY L 100 SW 75 ST STE 205 4907 NW 43RD STREET

GAINESVILLE, FL 32607 US SUITE F GAINESVILLE, FL 32606 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: AMY L HOWARD 02/16/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

PUGH, MERRILL PLA, JOHN M Name: Name: 100 SW 75 ST STE 205 4907 NW 43RD STREET F Address: Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32606

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

PLA, JOHN Name: Name: HOWARD, AMY L

100 SW 75 ST STE 205 Address: 4907 NW 43RD STREET F Address: GAINESVILLE, FL 32606 City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: AMY L HOWARD RA 02/16/2007