

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000068393

**FILED**  
**Jan 15, 2012**  
**Secretary of State**

**Entity Name:** FREEDOM NETWORK MANAGEMENT, INC.

**Current Principal Place of Business:**

1801 EAST COLONIAL DRIVE  
213  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

717 ALTALOMA AVE STE B  
ORLANDO, FL 32803 US

**New Mailing Address:**

**FEI Number:** 59-3268155

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EAKER, BRUCE  
1801 EAST COLONIAL DRIVE  
213  
ORLANDO, FL 32803 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: EAKER, BRUCE  
Address: 1801 EAST COLONIAL DRIVE STE. 213  
City-St-Zip: ORLANDO, FL 32803 US

Title: VP  
Name: EAKER, JAMES  
Address: 1801 EAST COLONIAL DRIVE STE. 213  
City-St-Zip: ORLANDO, FL 32803 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: BRUCE EAKER

P

01/15/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date