2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 04, 2006
Secretary of State

DOCUMENT# P94000073828

Entity Name: WITTEN TECHNOLOGIES, INC.

Current Principal Place of Business:

1365 WINDSOR HARBOR DRIVE
JACKSONVILLE, FL 32225 US

New Principal Place of Business:

Current Mailing Address:

1365 WINDSOR HARBOR DR
JACKSONVILLE, FL 32225 US

New Mailing Address:

FEI Number: 59-3284628 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HURSE, BRIAN H SR
1365 WINDSOR HARBOR DR
JACKSONVILLE, FL 32225 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: D/O ( ) Delete
Name: GREEN, ROBERT E CEO
Address: 3638 OVERLOOK AVE
City-St-Zip: MACON, GA 31204

Title: D ( ) Delete
Name: MILNE, DOUG
Address: 4595 LEXINGTON AVE
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: D/O ( ) Delete
Name: HURSE, BRIAN H EVP
Address: 1365 WINDSOR HARBOR DR
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: D ( ) Delete
Name: HOGAN, MICHAEL
Address: 5007 EAGLE POINT DRIVE
City-St-Zip: JACKSONVILLE, FL 32210

Title: O ( ) Delete
Name: KRAUSE, JOHN L SR. VP
Address: 2324 GATES DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: O ( ) Change (X) Addition
Name: BIRKEN, RALF
Address: 35 MEDFORD ST #306
City-St-Zip: SOMERVILLE, MA 02143

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: BRIAN H HURSE EVP 09/04/2006

Electronic Signature of Signing Officer or Director Date