

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000038902

FILED
Mar 22, 2007
Secretary of State

Entity Name: SOUND TRUTH PUBLISHING, INC.

Current Principal Place of Business:

3500 N COURTENAY PKWY
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

3500 N COURTENAY PKWY
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 59-3315315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILD, MALCOLM
3500 N COURTENAY PKWY
MERRITT ISLAND, FL 32953 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: DP () Delete
Name: WILD, MALCOLM
Address: 3500 N COURTENAY PKWY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: DST () Delete
Name: TAYLOE, ROBERT
Address: 4520 ANNETTE COURT
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DST (X) Change () Addition
Name: TAYLOE, ROBERT
Address: 200 S SYKES CRK PKWY #407A
City-St-Zip: MERRITT ISLAND, FL 32952

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: MALCOLM A WILD

PRES

03/22/2007

Electronic Signature of Signing Officer or Director

_____ Date