


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000077451 1. Entity Name LING MEDIA, INC.																													
Principal Place of Business P.O. BOX 23333 JACKSONVILLE FL 32241-3333			Mailing Address P.O. BOX 23333 JACKSONVILLE FL 32241-3333																										
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																										
City & State			City & State																										
Zip		Country		4. FEI Number 59-3338018 Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent LING, JULIA E 9252 SAN JOSE BLVD., #101 JACKSONVILLE FL 32257																									
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				8. 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. I am familiar with and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title and capacity. STATE Registered Agent signature required when "other than agent".</small>																									
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: center;">Delete</td> </tr> <tr> <td>NAME</td> <td>LING, JULIA E.</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>9252 SAN JOSE BLVD, #101</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>JACKSONVILLE FL</td> <td></td> </tr> </table>			TITLE	NAME	Delete	NAME	LING, JULIA E.		STREET ADDRESS	9252 SAN JOSE BLVD, #101		CITY- ST- ZIP	JACKSONVILLE FL		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">NAME</td> <td style="width:20%; text-align: center;">Change Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td></td> <td></td> </tr> </table>			TITLE	NAME	Change Addition	NAME			STREET ADDRESS			CITY- ST- ZIP		
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1st MOORE CR2E034 (10/07)

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05/02/08-80013-024 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Julia E. Ling Solo G. Davis 4/16/08 904/737-8824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR