2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000067455

Entity Name: TRADING TRADITIONS, INC.

FILED Jan 14, 2007 Secretary of State

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

709 STANDISH DRIVE 955 REGISTRY BOULEVARD

SAINT AUGUSTINE, FL 32086 109

SAINT AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

709 STANDISH DRIVE 411 WALNUT STREET

SAINT AUGUSTINE, FL 32086 #3743

GREEN COVE SPRINGS, FL 32043

FEI Number: 59-3402058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

SIMPSON, DONNA
709 STANDISH DRIVE
SIMPSON, DONNA
411 WALNUT STREET

709 STANDISH DRIVE 411 WALNUT STREE SAINT AUGUSTINE, FL 32086 US #3743

GREEN COVE SPRINGS, FL 32043 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: DONNA SIMPSON 01/14/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SIMPSON, DONNA
 Name:
 SIMPSON, DONNA

 Address:
 709 STANDISH DRIVE
 Address:
 411 WALNUT STREET #3743

 City-St-Zip:
 SAINT AUGUSTINE, FL 32086
 City-St-Zip:
 GREEN COVE SPRINGS, FL 32043

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

Name: SHIPPEY, KELLEY Name: SHIPPEY, KELLEY

Address: 709 STANDISH DRIVE Address: 411 WALNUT STREET #3743
City-St-Zip: SAINT AUGUSTINE, FL 32086 City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: DONNA SIMPSON STD 01/14/2007