

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000022107

Entity Name: VERBATIM REPORTING, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

2224 NE 17TH TERRACE
WILTON MANORS, FL 33305 US

New Principal Place of Business:

2201 MARINA BAY DR. W.
APT 103
FORT LAUDERDALE, FL 33312 US

Current Mailing Address:

2224 NE 17TH TERRACE
WILTON MANORS, FL 33305 US

New Mailing Address:

2201 MARINA BAY DR. W.
APT 103
FORT LAUDERDALE, FL 33312 US

FEI Number: 65-0832600

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASE, JOHN W ESQ
3810 NE 16TH AVENUE
FORT LAUDERDALE, FL 33304 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: PST () Delete
Name: DRUMM, ELIZABETH
Address: 2224 NE 17TH TERRACE
City-St-Zip: WILTON MANORS, FL 33305

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change () Addition
Name: DRUMM, ELIZABETH
Address: 2201 MARINA BAY DR. W. APT 103
City-St-Zip: FORT LAUDERDALE, FL 33312

I hereby certify that the information supplied with this filing does not qualify 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: ELIZABETH DRUMM

PST

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date