

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000076448

Entity Name: DIRECTHME.COM, INC.

FILED  
Jan 06, 2011  
Secretary of State

**Current Principal Place of Business:**

2931 KERRY FOREST PKWY SUITE 203  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

2931 KERRY FOREST PKWY SUITE 203  
TALLAHASSEE, FL 32309

**New Mailing Address:**

FEI Number: 59-3530884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOOD, JOHN H  
1324 THOMASWOOD DR.  
TALLAHASSEE, FL 32308 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WOOD, JOHN H  
Address: 545 FRANK SHAW RD  
City-St-Zip: TALLAHASSEE, FL 32312

Title: D  
Name: THOMAS, WILLIAM C  
Address: 1101 E. 7TH AVE.  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D  
Name: SHAFER, STEVE  
Address: 3054 SHAMROCK STREET NORTH  
City-St-Zip: TALLAHASSEE, FL 32309

I hereby 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 all other like empowered.

SIGNATURE: STEVE SHAFER

D

01/06/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date