

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000085189

Entity Name: REALITY CHECK INFORMATION, INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

1906 SE 3RD AVE
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5006
OCALA, FL 34471

New Mailing Address:

FEI Number: 59-3537207

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COPE, DAVID G
12765 SE 143RD AVE
OCKLAWAHA, FL 32199 US

Name and Address of New Registered Agent:

WOOD, DAVID A
6345 SE 42 CT
OCALA, FL 34480 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: DAVID A. WOOD

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COPE, DAVID G
Address: 12765 SE 143RD AVE
City-St-Zip: OCKLAWAHA, FL 32199

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR (X) Change () Addition
Name: COPE, DAVID G
Address: 12765 SE 143RD AVE
City-St-Zip: OCKLAWAHA, FL 32199 US

Title: MR () Change (X) Addition
Name: WOOD, DAVID A
Address: 6345 SE 42 CT
City-St-Zip: Ocala, FL 34480 US

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: DAVID A. WOOD

CEO

04/30/2008

Electronic Signature of Signing Officer or Director

Date