

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000014004

Entity Name: CONSIDER IT DONE, INC.

FILED
Apr 20, 2006
Secretary of State

Current Principal Place of Business:

2102 ALAMANDA DR., #106
NAPLES, FL 34102

New Principal Place of Business:

3115 LA COSTA CIR #204
NAPLES, FL 34105

Current Mailing Address:

2102 ALAMANDA DR., #106
NAPLES, FL 34102

New Mailing Address:

3115 LA COSTA CIR #204
NAPLES, FL 34105

FEI Number: 59-3559231

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUMMERSCALES, JILL
2102 ALAMANDA DR., #106
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

SUMMERSCALES, JILL
3115 LA COSTA CIR #204
NAPLES, FL 34105 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:

04/20/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SUMMERSCALES, JILL A
Address: 2102 ALAMANDA DR., #106
City-St-Zip: NAPLES, FL 34102

Title: VP () Delete
Name: CRAMER, LINDA M
Address: 2102 ALAMANDA DR., #106
City-St-Zip: NAPLES, FL 34102

Title: S () Delete
Name: CRAMER, LINDA
Address: 2102 ALAMANDA DR., #106
City-St-Zip: NAPLES, FL 34102

Title: T () Delete
Name: SUMMERSCALES, JILL
Address: 2102 ALAMANDA DR., #106
City-St-Zip: NAPLES, FL 34102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SUMMERSCALES, JILL A
Address: 3115 LA COSTA CIR #204
City-St-Zip: NAPLES, FL 34105

Title: VP (X) Change () Addition
Name: CRAMER, LINDA M
Address: 3115 LA COSTA CIR #204
City-St-Zip: NAPLES, FL 34105

Title: S (X) Change () Addition
Name: CRAMER, LINDA
Address: 3115 LA COSTA CIR #204
City-St-Zip: NAPLES, FL 34105

Title: T (X) Change () Addition
Name: SUMMERSCALES, JILL
Address: 3115 LA COSTA CIR #204
City-St-Zip: NAPLES, FL 34105

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: JILL SUMMERSCALES

P

04/20/2006

Electronic Signature of Signing Officer or Director

Date