


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 JUL 31 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000038153			
1. Entity Name GET PUBLISHED, INC.			
Principal Place of Business 505 BEACHLAND BLVD #1-250 VERO BEACH, FL 32963		Mailing Address 505 BEACHLAND BLVD #1-250 VERO BEACH, FL 32963	
2. Principal Place of Business 5419 83rd Terrace East Suite, Apt. #, etc.		3. Mailing Address 5419 83rd Terrace East Suite, Apt. #, etc.	
City & State Sarasota, FL 34243 Zip Country 34243 U.S.A.		City & State Sarasota, FL 34243 Zip Country 34243 USA	
4. FEI Number 65-0922506		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LARKIN, LYNNE A 5690 N A-1-A HIGHWAY SUITE 101 VERO BEACH, FL 32963		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT HAGBERG, DAVID 505 BEACHLAND BLVD #1-250 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	David Hagberg <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5419 83rd Terrace East Sarasota, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS HAGBERG, LAURIE 505 BEACHLAND BLVD #1-250 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Laurie Hagberg <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5419 83rd Terrace East Sarasota, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: 7/24/06 941 358-2058 <small>Daytime Phone #</small>	