2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000079818

Entity Name: RIGHT BRAIN IDEAS, INC.

FILED Apr 29, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2280 GLENMOOR RD S 115 25TH AVENUE NORTH SAINT PETERSBURG, FL 33704

Current Mailing Address: New Mailing Address:

2280 GLENMOOR RD S CLEARWATER, FL 33764

FEI Number: 59-3601633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

OCONNOR, PATRICK M
2240 BELLAIR RD, SUITE 160
CLEARWATER, FL 33762 US

PATRICK O'CONNOR & ASSOCIATES
2240 BELLAIR RD, SUITE 160
CLEARWATER, FL 33762 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: PATRICK O'CONNOR 04/29/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: DOWNS, CHARLES E Name: DOWNS, CHARLES E

Address: 6371 29TH AVE NO Address: 2280 GLENMOOR RD S
City-St-Zip: ST. PETERSBURG, FL 33710 City-St-Zip: CLEARWATER, FL 33764

Title: SD () Delete Title: SD (X) Change () Addition Name: THOMPSON, BETH A Name: THOMPSON, BETH A

 Name:
 Incompsion, Beth A
 Name:
 Incompsion, Beth A

 Address:
 6371 29TH AVE NO
 Address:
 115 25TH AVENUE NORTH

 City-St-Zip:
 ST. PETERSBURG, FL 33710
 City-St-Zip:
 ST. PETERSBURG, FL 33704

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 DOWNS, MELANIE S
 Name:
 DOWNS, MELANIE S

 Address:
 6371 29TH AVE NO
 Address:
 5950 3RD AVENUE NORTH

 City-St-Zip:
 ST. PETERSBURG, FL 33710
 City-St-Zip:
 ST. PETERSBURG, FL 33710

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: CHARLES DOWNS PD 04/29/2007