

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S45046

FILED
Jul 14, 2006
Secretary of State

Entity Name: SMARTCERTIFY DIRECT, INC.

Current Principal Place of Business:

25400 US HWY 19
SUITE 285
CLEARWATER, FL 33763 US

New Principal Place of Business:

Current Mailing Address:

25400 US HWY 19 N.
SUITE 285
CLEARWATER, FL 33763 US

New Mailing Address:

FEI Number: 59-3049917 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: COBC () Delete
Name: PRIEST, GREGORY M
Address: 20 INDUSTRIAL PARK DR
City-St-Zip: NASHUA, NH 03062

Title: CEOP () Delete
Name: MORAN, CHUCK
Address: 20 INDUSTRIAL PARK DR
City-St-Zip: NASHUA, NH 03062

Title: CFOE () Delete
Name: MCDONALD, TOM
Address: 20 INDUSTRIAL PARK DR
City-St-Zip: NASHUA, NH 03062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: COBC (X) Change () Addition
Name: PRIEST, GREGORY M
Address: 107 NORTHEASTERN BLVD
City-St-Zip: NASHUA, NH 03062

Title: CEOP (X) Change () Addition
Name: MORAN, CHARLES
Address: 107 NORTHEASTERN BLVD
City-St-Zip: NASHUA, NH 03062

Title: CFOE (X) Change () Addition
Name: MCDONALD, THOMAS
Address: 107 NORTHEASTERN BLVD
City-St-Zip: NASHUA, NH 03062

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: THOMAS MCDONALD

CFOE

07/14/2006

Electronic Signature of Signing Officer or Director

Date