

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S45746

FILED
Apr 08, 2005
Secretary of State

Entity Name: PLANOGRAMMING SOLUTIONS, INC.

Current Principal Place of Business:

<UNUSED>
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

9080 GOLFSIDE DRIVE
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 59-3083469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODLIEF, MITCHEL E.
225 E CHURCH ST
JACKSONVILLE, FL 32202 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: DPT () Delete
Name: BECTON, DANIEL A.,
Address: 7934 MCLAURIN ROAD NORTH
City-St-Zip: JACKSONVILLE, FL 32256

Title: DVP () Delete
Name: VANDERBECK, BRUCE ED, WARD
Address: 87 LAUREL GROVE RD
City-St-Zip: BRUNSWICK, GA 31523

Title: S () Delete
Name: VANDERBECK, BRUCE ED, WARD
Address: 87 LAUREL GROVE ROAD
City-St-Zip: BRUNSWICK, GA 31523

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DANIEL A. BECTON

DPT

04/08/2005

Electronic Signature of Signing Officer or Director

Date