

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V28443

FILED  
Mar 31, 2007  
Secretary of State

Entity Name: COMPREHENSIVE DATA BASE, INC.

**Current Principal Place of Business:**

3821 PROGRESS DR  
LAKELAND, FL 33811

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 395  
INTERCESSION CITY, FL 33848

**New Mailing Address:**

FEI Number: 59-3121717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, S. TAYLOR  
5035 HEATHER LAKE TER  
KISSIMMEE, FL 34758 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: D ( ) Delete  
Name: BROWN, S. TAYLOR,  
Address: 5035 HEATHER LAKE TER  
City-St-Zip: KISSIMMEE, FL 34758 US

Title: D ( ) Delete  
Name: NEMETH, D. RICHARD,  
Address: 3111 RIPPLEWOOD DR  
City-St-Zip: SEFFNER, FL 33584 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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: DON RICHARD NEMETH

PRES

03/31/2007

Electronic Signature of Signing Officer or Director

Date