2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V56716

FILED Jan 26, 2009 Secretary of State

Entity Name: SOUND PLANNING DISTRIBUTORS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	. 103RD AVE. ERDALE, FL 33328			
Current N	lailing Address:		New Mailing Addre	ess:
	. 103RD AVE. ERDALE, FL 33328			
El Number	: 65-0001542 FEI Num	ber Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of Current Re	egistered Agent:	Name and Address	s of New Registered Agent:
5726 S W				
T. LAUD	e named entity submits th	is statement for the	purpose of changing its registe	ered office or registered agent, or both,
T. LAUD The above n the Stat	ERDALE, FL 33328 Lenamed entity submits the of Florida.		purpose of changing its registe	ered office or registered agent, or both,
T. LAUD	ERDALE, FL 33328 Lenamed entity submits the of Florida.			ered office or registered agent, or both, Date
T. LAUD The above n the Stat	ERDALE, FL 33328 Lenamed entity submits the of Florida.	is statement for the		
T. LAUD The above n the Stat SIGNATU	e named entity submits the of Florida. RE: Electronic Signatu	is statement for the	ent	
T. LAUD The above n the Stat SIGNATU	e named entity submits the of Florida. RE: Electronic Signatum mpaign Financing Trust Func	is statement for the	ent	Date
The above n the State SIGNATU Election Ca DFFICER Title: Jame: Address:	e named entity submits the of Florida. RE: Electronic Signatum mpaign Financing Trust Funda S AND DIRECTORS: DP () Delete ARMSTRONG, DAVID B., 5726 S.W. 103RD AVE.	is statement for the	ent ADDITIONS/CHAN Title: Name: Address:	Date

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: DAVID B ARMSTRONG PRES 01/26/2009