

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004203

FILED
May 02, 2006
Secretary of State

Entity Name: RADIANT RESEARCH INC.

Current Principal Place of Business:

2081 E OCEAN BLVD
STE 1-A
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

1120 112TH AVENUE NE
SUITE 480
BELLEVUE, WA 98004

New Mailing Address:

FEI Number: 91-1741190 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T 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: PS () Delete
Name: LESTER, MICHAEL K
Address: 12131-113TH AVE NE STE 202
City-St-Zip: KIRKLAND, WA 98034

Title: D () Delete
Name: GRANT, CHRISTOPHER JR
Address: 300 BRICKSTONE SQUARE, SUITE 1003
City-St-Zip: ANDOVER, MA 01810

Title: VPT () Delete
Name: SPANIAC, PAM
Address: 12131-113TH AVE NE STE 202
City-St-Zip: KIRKLAND, WA 98034

Title: D () Delete
Name: HALL, DAVID
Address: 506 COUNTY ROAD 150
City-St-Zip: WESTCLIFFE, CO 81252

Title: D () Delete
Name: STOBO, JOHN D
Address: 505 SANSOME STREET, SUITE 1550
City-St-Zip: SAN FRANCISCO, CA 94111

Title: D () Delete
Name: ROBERG, KEVIN L
Address: 1695 HUNTER DRIVE
City-St-Zip: MEDINA, MN 55391

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:

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Address:
City-St-Zip:

Title: () Change () Addition
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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: MICHAEL K. LESTER

PS

05/02/2006

Electronic Signature of Signing Officer or Director

_____ Date