2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000068633

Entity Name: L2D2 DIRECT, INC.

FILED Jan 10, 2007 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

6860 GULFPORT BLVD 9374 WESTLINKS TERRACE 345 SEMINOLE, FL 33777 US

ST. PETERSBURG, FL 33707 US

Current Mailing Address: New Mailing Address:

6860 GULFPORT BLVD 9374 WESTLINKS TERRACE 345 SEMINOLE, FL 33777 US

SO. PASADENA, FL 33707 US

FEI Number: 59-3383780 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LAFAIR, LYNDA J
6860 GULFPORT BLVD
9374 WESTLINKS TERRACE
SOUTH #345
ST. PETERSBURG, FL 33707 US

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: LYNDA J. LAFAIR 01/10/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete Title: PRES (X) Change () Addition

 Name:
 LAFAIR, LYNDA J
 Name:
 LAFAIR, LYNDA J

 Address:
 6860 GULFPORT BLVD., SO #345
 Address:
 9374 WESTLINKS TERRACE

 City-St-Zip:
 SAINT PETERSBURG, FL 33707
 City-St-Zip:
 SEMINOLE, FL 33777

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: LYNDA J. LAFAIR PRES 01/10/2007

Electronic Signature of Signing Officer or Director

Date