2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2010
Secretary of State

DOCUMENT# P05000066697

Entity Name: BAD APPLE COMICS, INC.

Current Principal Place of Business:

8110 S ORANGE BLOSSOM TRL
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

2101 WEST STATE ROAD 434
SUITE 100
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 86-1138002 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KALEY, MARK
14924 GAULBERRY RUN
WINTER GARDEN, FL 34787 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: PD
Name: MAGUIRE, MATTHEW
Address: 2101 WEST STATE ROAD 434, STE 100
City-St-Zip: LONGWOOD, FL 32779

Title: V
Name: SCHINAULT, SHAWN
Address: 2101 WEST STATE ROAD 434, STE 100
City-St-Zip: LONGWOOD, FL 32779

Title: STD
Name: KALEY, MARK
Address: 2101 WEST STATE ROAD 434, STE 100
City-St-Zip: LONGWOOD, FL 32779

Title: D
Name: JABLON, MARC
Address: 2101 WEST STATE ROAD 434, STE 100
City-St-Zip: LONGWOOD, FL 32779

Title: D
Name: ALTAMORE, ANTHONY
Address: 2101 WEST STATE ROAD 434, STE 100
City-St-Zip: LONGWOOD, FL 32779

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW MAGUIRE PD 04/06/2010

Electronic Signature of Signing Officer or Director Date