

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000132103

FILED  
Mar 28, 2008  
Secretary of State

Entity Name: THE TROLLINATOR CORPORATION

## Current Principal Place of Business:

3345 VICTORIA LANE  
WAUKEGAN, IL 60087 US

## New Principal Place of Business:

6000 PHILLIPS HIGHWAY  
7  
JACKSONVILLE, FL 32216 US

## Current Mailing Address:

3345 VICTORIA LANE  
WAUKEGAN, IL 60087 US

## New Mailing Address:

6000 PHILLIPS HIGHWAY  
7  
JACKSONVILLE, FL 32216 US

FEI Number: 21-1613973

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NUNN, J.R.  
3220 SEQUOYAH CIRCLE  
JACKSONVILLE, FL 32259 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: P ( ) Delete  
Name: GOULETTE, STEPHEN D  
Address: 3345 VICTORIA LANE  
City-St-Zip: WAUKEGAN, IL 60087 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: GOULETTE, STEPHEN D PRES.  
Address: 3345 VICTORIA LANE  
City-St-Zip: WAUKEGAN, IL 60087 US

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: STEPHEN D. GOULETTE

PRES

03/28/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date