2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000020949

Entity Name: COPY WELL, INC.

FILED Apr 15, 2009 Secretary of State

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

EXPRESS PRINTING 927 NORTH MONROE STREET TALLAHASSEE, FL 32303

Current Mailing Address: New Mailing Address:

P.O.BOX 16063 TALLAHASSEE, FL 32317

FEI Number: 59-3573942 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:

TAROON, SHAH

1850 VINEYARD WAY

TALLAHASSEE, FL 32317 US

SHAH, TAROON N P

1850 VINEYARD WAY

TALLAHASSEE, FL 32317 US

TALLAHASSEE, FL 32317 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: TAROON N. SHAH 04/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP () Delete Title: VP (X) Change () Addition Name: SHAH, SAMEERA T Name: SHAH, SAMEERA T VP Address: 1850 VINEYARD WAY 1850 VINEYARD WAY

Address: 1850 VINEYARD WAY
City-St-Zip: TALLAHASSEE, FL 32317
Address: 1850 VINEYARD WAY
City-St-Zip: TALLAHASSEE, FL 32317
City-St-Zip: TALLAHASSEE, FL 32317

Title: P () Delete Title: P (X) Change () Addition
Name: SHAH, TAROON N Name: SHAH, TAROON N P

Address: 1850 VINEYARD WAY Address: 1850 VINEYARD WAY
City-St-Zip: TALLAHASSEE, FL 32317 City-St-Zip: TALLAHASSEE, FL 32317

Title: TS () Delete Title: TS (X) Change () Addition

 Name:
 SHAH, SALIL T
 Name:
 SHAH, SALIL T TS

 Address:
 1850 VINEYARD WAY
 Address:
 1850 VINEYARD WAY

 City-St-Zip:
 TALLAHASSEE, FL 32317
 City-St-Zip:
 TALLAHASSEE, FL 32317

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: TAROON N. SHAH P 04/15/2009