2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2008 8:00 am Secretary of State

1. Entity Name	MENT # N0300001 SFUL SYSTEMS, INC.	0852				04-18-2008 - -	90025 038 ****6	1.25
Principal Place of Business 699 CLAY STREET WINTER PARK, FL 32789 US Mailing Address 699 CLAY STREET WINTER PARK, FL 32789				JS		PISE AND POST OFFI		NBIFS. S. FEST
2 Principal P	lace of Business - No P.O. Box #	3. Mailing Address						
z. Fillicipal i	Lace of business - 140 F.O. Box #	5. Walling Address			110000000	PER IIIFI MULII MULII	Milt Mului grāli nātāl (2007) dirim	ITALIEL EL LESI
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03312008	Chg-NP	CR2E037 (12/06)	
City & State		City & State		4. FEI Number 20-0513	527		Applied For Not Applicable	
Zip	Country	Zip	Cou	untry	5. Certificate o	f Status Desired	□ \$8.75 A	
	6. Name and Address of Curren	t Registered Agent			7. Name and A	ddress of New	Registered Agent	
RIVERS, MICHELE B				Name				
2010 BOBTAIL DRIVE MAITLAND, FL 32751				Street Address (P.O. Box Number is Not Acceptable)				
				City			Zip Co	ode
.,	named entity submits this statement						rl	
	ions of registered agent.		v		•			
0.0.0.0.0.	Signature, typed or printed name of registered age	nt and little if applicable.	(NOTE: Registere	ed Agent signature	required when reinstating)		DATE	
	Signature, typed or printed name of registered age Filling Fee is \$61.25 Due by May 1, 2008	9. Electi	(NOTE: Registere on Campaign F Fund Contribut	Financing	\$5.00 May Be	FI	Make check payable	to 50
10.	Filing Fee is \$61.25 Due by May 1, 2008 OFFICERS AND D	9. Electi Trust	on Campaign F	Financing tion.	\$5.00 May Be Added to Fees	// Flo	Make check payable	State
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Indicated on this report or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. office

SIGNATURE:

ne (407)740-7673