

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000114392

Entity Name: SECURE ONLINE FORMS, INC.

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

2582 S MAGUIRE RD #163  
OCOE, FL 34761

## New Principal Place of Business:

## Current Mailing Address:

2582 S MAGUIRE RD #163  
OCOE, FL 34761

## New Mailing Address:

FEI Number: 41-2183774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FOX, CAROLYN A  
10331 OAKVIEW POINTE TERR  
GOTHA, FL 34734 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: FOX, GREG A  
Address: 2582 S MAGUIRE RD #163  
City-St-Zip: OCOE, FL 34761

Title: VSD (X) Delete  
Name: FOX, CAROLYN A  
Address: 2582 S MAGUIRE RD #163  
City-St-Zip: OCOE, FL 34761

Title: D (X) Delete  
Name: BROWN, JEROMEY  
Address: 2582 S MAGUIRE RD #163  
City-St-Zip: OCOE, FL 34761

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: GREG A FOX

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date