

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838147

FILED  
Apr 24, 2009  
Secretary of State

Entity Name: ZEE CORPORATION OF DELAWARE

## Current Principal Place of Business:

1600 W. US HWY 20  
SUITE 22  
PORTER, IN 46304

## New Principal Place of Business:

## Current Mailing Address:

1800 OLD LINCOLN HWY  
P.O. BOX 693  
LANGHORNE, PA 19047

## New Mailing Address:

P.O. BOX 693  
LANGHORNE, PA 19047

FEI Number: 25-1096147

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

MOSS, MARVIN  
20801 BISCAYNE BLVD  
AVENTURA CORPORATE CENTER SUITE 506  
NORTH MIAMI BEACH, FL 33180 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: TSD ( ) Delete  
Name: SHETZLEY, JAMES C  
Address: 23 FAIR OAKS  
City-St-Zip: NEWTOWN, PA 18940 US

Title: VD ( ) Delete  
Name: HARKINS, MICHAEL  
Address: 5346 WISMER ROAD  
City-St-Zip: PIPERSVILLE, PA 18947 US

Title: PD ( ) Delete  
Name: DURBIN, TIMOTHY  
Address: P.O. BOX 1281  
City-St-Zip: LANGHORNE, PA 18940

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change ( ) Addition  
Name: DURBIN, TIMOTHY G  
Address: P.O. BOX 1281  
City-St-Zip: LANGHORNE, PA 18940

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: JAMES SHETZLEY

TSD

04/24/2009

Electronic Signature of Signing Officer or Director

Date