

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000004649

Entity Name: IRVINE ACCESS FLOORS, INC.

FILED
Mar 04, 2009
Secretary of State

Current Principal Place of Business:

9425 WASHINGTON BLVD,
SUITE Y-WW
LAUREL, MD 207231378

New Principal Place of Business:

Current Mailing Address:

9425 WASHINGTON BLVD
SUITE Y-WW
LAUREL, MD 207231378

New Mailing Address:

9425 WASHINGTON BLVD,
SUITE Y-WW
LAUREL, MD 207231378

FEI Number: 52-1236974

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WORTHINGTON, P. LAURENSEN
2150 PREMIER ROW
ORLANDO, FL 32809 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: WORTHINGTON, P. LAURENSEN
Address: 4535 ALLEN RD.
City-St-Zip: RANDALLSTOWN, MD 21133

Title: ST () Delete
Name: YOST, SUSAN
Address: 105 HERITAGE LANE
City-St-Zip: SYKESVILLE, MD 21784

Title: VP () Delete
Name: RADTKE, JAMES L
Address: 2112 BAY FRONT TERRACE
City-St-Zip: ANNAPOLIS, MD 21409

Title: VP () Delete
Name: IRVINE, CHRISTOPHER L
Address: 5108 MEADOW VALLEY CIRCLE
City-St-Zip: ROANOKE, VA 24018

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:

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: SUSAN YOST

ST

03/04/2009

Electronic Signature of Signing Officer or Director

Date