## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000006149

Entity Name: THESEUS LOGIC, INC.

ORLANDO, FL 32826

FILED May 02, 2007 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

TWO RESOURCE SQUARE 2500 MAITLAND CENTER PARKWAY

12000 RESEARCH PARKWAY, SUITE 436 SUITE 203 ORLANDO, FL 32826

MAITLAND, FL 32751

New Mailing Address:

**Current Mailing Address:** 

TWO RESOURCE SQUARE 2500 MAITLAND CENTER PARKWAY

12000 RESEARCH PARKWAY, SUITE 436 SUITE 203

MAITLAND, FL 32751

FEI Number: 41-1821836 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:

LAMB, DAVID R PRES LAMB, DAVID R PRES 2500 MAITLAND CENTER PARKWAY TWO RESOURCE SQUARE 12000 RESEARCH PARKWAY, SUITE 436 SUITE 203

ORLANDO, FL 32826 US MAITLAND, FL 32751 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: 05/02/2007

> 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

LAMB, DAVID R DR Name: Name: LAMB, DAVID R DR

12000 RESEARCH PARKWAY, SUITE 436 Address: 2500 MAITLAND CENTER PARKWAY, STE 203 Address:

City-St-Zip: ORLANDO, FL 32826 City-St-Zip: MAITLAND, FL 32751

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

JORGENSON, RYAN Name: Name: 12000 RESEARCH PARKWAY, SUITE 436 Address: Address: ORLANDO, FL 32826 City-St-Zip: City-St-Zip:

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

KOBLER, HANS Name: Name: 12000 RESEARCH PARKWAY, SUITE 436 Address: Address City-St-Zip: ORLANDO, FL 32826 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: DAVID R. LAMB CEO 05/02/2007