

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003608

FILED
Apr 04, 2008
Secretary of State

Entity Name: AVALEX TECHNOLOGIES CORPORATION

Current Principal Place of Business:

115-A GREGORY SQUARE
PENSACOLA, FL 32501

New Principal Place of Business:

115-A GREGORY SQUARE
PENSACOLA, FL 32502

Current Mailing Address:

115-A GREGORY SQUARE
PENSACOLA, FL 32501

New Mailing Address:

115-A GREGORY SQUARE
PENSACOLA, FL 32502

FEI Number: 58-2030222

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IHNS, JURGEN R
1929 WOODBRIDGE
PENSACOLA, FL 32514 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: PCD () Delete
Name: IHNS, JURGEN R
Address: 380 HIGH BROOK DRIVE
City-St-Zip: ATLANTA, GA 30342

Title: S () Delete
Name: IHNS, LISA H
Address: 380 HIGH BROOK DRIVE
City-St-Zip: ATLANTA, GA 30342

Title: D (X) Delete
Name: SEARS, RICHARD H
Address: 3002 STEEP BANK CIRCLE
City-St-Zip: SUGARLAND, TX 77479

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD (X) Change () Addition
Name: IHNS, JURGEN R
Address: 1929 WOODBRIDGE
City-St-Zip: PENSACOLA, FL 32514

Title: S (X) Change () Addition
Name: IHNS, LISA H
Address: 1929 WOODBRIDGE
City-St-Zip: PENSACOLA, FL 32514

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: BRIDGET MCCLENDON

FA

04/04/2008

Electronic Signature of Signing Officer or Director

Date