## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000006343

Entity Name: REFLECTXION RESOURCES, INC.

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
Cilrrent Principal Place of Bliginess	NAW Principal Place of Kilsiness

250 INTERNATIONAL PARKWAY 7227 LEE DEFOREST DRIVE SUITE 260 COLUMBIA, MD 21046

LAKE MARY, FL 32746

Current Mailing Address: New Mailing Address:

250 INTERNATIONAL PARKWAY 7227 LEE DEFOREST DRIVE SUITE 260 COLUMBIA, MD 21046

LAKE MARY, FL 32746

FEI Number: 80-0016171 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:

CORPORATION SERVICES COMPANY 1201 HAYS STREET TALLAHASSEE, FL FL3230136 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: DIXON, DARYL A Name: WYNNE, BRIAN
Address: 2030 ALAQUA LAKES BLVD Address: 72274 LEE DEFOREST DRIVE

City-St-Zip: LONGWOOD, FL 32779

Address. 72274 EEE DEI OREST DRIVE
City-St-Zip: COLUMBIA, MD 21046

Title: P ( ) Delete Title: VT S (X) Change ( ) Addition Name: WYNNE, BRIAN Name: FRANCHAK, DAVID

Address: 7227 LEE DEFOREST DR Address: 7227 LEE DEFOREST DR City-St-Zip: COLUMBIA, MD 21046 City-St-Zip: COLUMBIA, MD 21046

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

 Name:
 FRANCHAK, DÁVID
 Name:

 Address:
 7227 LEE DEFOREST DR
 Address:

 City-St-Zip:
 COLUMBIA, MD 21046
 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: ROSE STEPANEK TA 04/28/2009