

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006381

FILED
Mar 24, 2009
Secretary of State

Entity Name: RETRO-TECH SYSTEMS, INC.

Current Principal Place of Business:

2800 BERNICE ROAD, #17-A
SUITE 17A
LANSING, IL 60438

New Principal Place of Business:

Current Mailing Address:

2800 BERNICE ROAD, #17-A
SUITE 17A
LANSING, IL 60438

New Mailing Address:

FEI Number: 36-3912716 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRSCHT, STUART
999 GENIUS DR.
WINTER PARK, FL 32789 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: PSD () Delete
Name: MINKO, KURT
Address: 7900 WEST 82ND COURT
City-St-Zip: CROWN POINT, IN 46307

Title: VPD () Delete
Name: MAYNARD, GARY E
Address: 9120 SCHILLTON DRIVE
City-St-Zip: ST. JOHN, IN 46373

Title: VPD () Delete
Name: KIRSCHT, STUART
Address: 999 GENIUS DR
City-St-Zip: WINTER PARK, FL 32789

Title: VPD () Delete
Name: ROSHOLT, STEVE
Address: 11737 N. 129TH WAY
City-St-Zip: SCOTTSDALE, AZ 85259

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: GEORGE E. GUCWA

CONT

03/24/2009

Electronic Signature of Signing Officer or Director

_____ Date