## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01225

Entity Name: VIRSAN, INC.

FILED Jan 11, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

570 MEMORIAL CIRCLE SUITE 330

ORMOND BEACH, FL 32174 US

Current Mailing Address: New Mailing Address:

570 MEMORIAL CIRCLE SUITE 330

ORMOND BEACH, FL 32174 US

FEI Number: 59-2030756 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:

DAVIS, EDWIN D., II 570 MEMORIAL CIRCLE SUITE 330 ORMOND BEACH, FL 32174 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.

in the otate of the

SIGNATURE: Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: PD

Name: DAVIS, EDWIN D.

Address: 570 MEMORIAL CIRCLE, SUITE 330 City-St-Zip: ORMOND BEACH, FL 32174

Title: VTD

Name: DYER, DIANNA D.

Address: 570 MEMORIAL CIRCLE, SUITE 330 City-St-Zip: ORMOND BEACH, FL 32174

Title: D

Name: PRESLOCK, BARBARA D.

Address: 570 MEMORIAL CIRCLE, SUITE 330 City-St-Zip: ORMOND BEACH, FL 32174

Title: VSD

Name: DAVIS, EDWIN D., II

Address: 570 MEMORIAL CIRCLE, SUITE 330 City-St-Zip: ORMOND BEACH, FL 32174

Title: [

Name: DAVIS, EDWINNA

Address: 570 MEMORIAL CIRCLE, SUITE 330 City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: EDWIN D. DAVIS PD 01/11/2011