2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003020

Entity Name: INTELLIKEY CORPORATION

FILED May 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4325 WOODLAND PARK DR. STE 102 MELBOURNE, FL 32904 **Current Mailing Address: New Mailing Address:** 4325 WOODLAND PARK DR. STE 102 MELBOURNE, FL 32904 FEI Number: 02-0629236 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 SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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: () Delete Title: () Change () Addition Name: BRAGG, GARY L Name: 531 PLYMOUTH RD., SUITE 500 Address: Address: City-St-Zip: PLYMOUTH MEETING, PA 19462 City-St-Zip: Title: Title: () Delete () Change () Addition VERGE, WILLIAM Name: Name: 329 PIACONE LANE Address: Address: KEY WEST, FL 33040 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition PITNER, SHANNON Name: Name: 410 N. MIRAMAR AVE. Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip: Title: () Delete Title: () Change () Addition CHHATWAL, SINGH Name: Name: Address: 4325 WOODLAND PARK DR. STE 102 Address: City-St-Zip: MELBOURNE, FL 32904 City-St-Zip: Title: Title: () Delete () Change () Addition WAGNER, WILLIAM Name: Name: 862 HAWKSBIL ISLAND DR Address: Address: City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SILAS, CHARLES Name: 1815 VILLA ESPANA TRAIL Address: Address: City-St-Zip: City-St-Zip: MELBOURNE, FL 32935

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: SINGH K.CHHATWAL PRES 05/07/2009