

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003452

FILED
Jan 13, 2009
Secretary of State

Entity Name: SAGE TECHNICAL SERVICES, INC.

Current Principal Place of Business:

4242 CARLISLE PIKE, STE. 177
CAMP HILL, PA 17011

New Principal Place of Business:

Current Mailing Address:

4242 CARLISLE PIKE, STE. 177
CAMP HILL, PA 17011

New Mailing Address:

FEI Number: 25-1609652

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCE, RONALD C
IRCC 3209 VIRGINIA AVE.
MS-C210
FT. PIERCE, FL 34981 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: VD () Delete
Name: SCANLON, HENRY
Address: 837 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: TD () Delete
Name: CURIALE, JUDY
Address: 36 SEQUOIA DRIVE
City-St-Zip: WATCHUNG, NJ 07069

Title: D () Delete
Name: STUCKEY, MICHAEL
Address: 135 RED HILL ROAD
City-St-Zip: OTTSVILLE, PA 18942

Title: PCEO () Delete
Name: AVERSA, GREGG R
Address: 245 EAST LAUER LANE
City-St-Zip: CAMP HILL, PA 17011

Title: D () Delete
Name: GRILL, LEWIS
Address: 3311 BEN HOGAN LANE
City-St-Zip: BILLINGS, MT 59106

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: STUCKEY, MICHAEL
Address: 135 RED HILL ROAD
City-St-Zip: OTTSVILLE, PA 18942

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: GREGG R AVERSA

CEO

01/13/2009

Electronic Signature of Signing Officer or Director

_____ Date