2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003310

Entity Name: SOAR TECHNOLOGY, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3361 ROUSE ROAD, SUITE 175 ORLANDO, FL 32817 **Current Mailing Address: New Mailing Address:** 3600 GREEN COURT ANN ARBOR, MI 48105 FEI Number: 38-3382261 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DR, SUITE R WESTON, FL 33331 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: (X) Change () Addition VAN LENT, MICHAELC R Name: ROSBE, JAMES R Name: 3364 TACOMA CIRCLE 1825 TIMBER TRAIL Address: Address: City-St-Zip: ANN ARBOR, MI 48108 City-St-Zip: ANN ARBOR, MI 48103 Title: Title: () Delete () Change () Addition Name: JONES, RANDOLPH Name: 44 BURLEIGH ST. Address: Address: WATERVILLE, ME 04901 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition HARDING, KATHERINE Name: Name: 2109 SOUTH SEVENTH ST Address: Address: City-St-Zip: ANN ARBOR, MI 48103 City-St-Zip: Title: SD () Delete Title: () Change () Addition KOSS, FRANK Name: Name: Address: 9919 LINCOLN DR Address: City-St-Zip: BRIGHTON, MI 48116 City-St-Zip: Title: Title: () Delete () Change () Addition TALCOTT, KENT Name: Name: 2309 WEBER DRIVE Address: Address: City-St-Zip: DEXTER, MI 48130 City-St-Zip: () Delete Title: Title: (X) Change () Addition PRICE, JIM Name: Name: LAIRD, JOHN 311 WINDY CREST DR Address: 2124 BROCKMAN BLVD Address: City-St-Zip: ANN ARBOR, MI 48104 City-St-Zip: ANN ARBOR, MI 48105

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: MICHAEL C VAN LENT PCT 04/14/2009