

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006649

Entity Name: APPLIED PLASMONICS, INC.

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

3239 SW 47TH AVE
STE 200
GAINESVILLE, FL 32608

New Principal Place of Business:

3239 SW 47TH AVE
STE 200
GAINESVILLE, FL 32609

Current Mailing Address:

3239 SW 47TH AVE
STE 200
GAINESVILLE, FL 32608

New Mailing Address:

3239 SW 47TH AVE
STE 200
GAINESVILLE, FL 32609

FEI Number: 20-5824907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR
STE 4
WESTON, FL 33331 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: COOD () Delete
Name: DAVIS, HENRY
Address: 3239 SW 47TH AVE - STE 200
City-St-Zip: GAINESVILLE, FL 32608

Title: PD () Delete
Name: GORREL, JONATHAN
Address: 3239 SW 47TH AVE - STE 200
City-St-Zip: GAINESVILLE, FL 32608

Title: D () Delete
Name: VENTO, DICK
Address: #17 ESTATE FYDENDAHL
City-St-Zip: ST THOMAS, VI 00802

Title: D () Delete
Name: VENTO, LANA
Address: #17 ESTATE FYDENDAHL
City-St-Zip: ST THOMAS, VI 00802

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: JONATHAN GORREL

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date