

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007557

FILED
Mar 20, 2009
Secretary of State

Entity Name: SOURCERER'S APPRENTICE, INC.

Current Principal Place of Business:

2638 NW 64TH BLVD
BOCA RATON, FL 33496

New Principal Place of Business:

Current Mailing Address:

2638 NW 64TH BLVD
BOCA RATON, FL 33496

New Mailing Address:

FEI Number: 42-1649189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEINMAN, TRUDI
2638 NW 64TH BLVD
BOCA RATON, FL 33496 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: CP () Delete
Name: FEINMAN, TRUDI
Address: 2638 NW 64TH BLVD
City-St-Zip: BOCA RATON, FL 33496

Title: VCVP () Delete
Name: RYAN, JOHN
Address: 3 LACOSTE CT
City-St-Zip: ROGERS, AK 72758

Title: DST () Delete
Name: FEINMAN, HARVEY
Address: 2638 NW 64TH BLVD
City-St-Zip: BOCA RATON, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: FEINMAN, TRUDI PRES.
Address: 2638 NW 64TH BLVD
City-St-Zip: BOCA RATON, FL 33496

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

Title: DST (X) Change () Addition
Name: FEINMAN, HARVEY SECY
Address: 2638 NW 64TH BLVD
City-St-Zip: BOCA RATON, FL 33496

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: GARY HYMAN

Electronic Signature of Signing Officer or Director

CPA

03/20/2009

Date