

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007604

FILED
Jan 19, 2009
Secretary of State

Entity Name: AGGIC, INC.

Current Principal Place of Business:

900 NW 6TH TERRACE
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

900 NW 6TH TERRACE
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 32-0177612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUNSFORD, JOSEPH
900 NW 6TH TERRACE
BOCA RATON, FL 33486 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

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: LUNSFORD, JOSEPH
Address: 900 NW 6TH TERRACE
City-St-Zip: BOCA RATON, FL 33486

Title: VCST () Delete
Name: LUNSFORD, KEN
Address: 900 NW 6TH TERRACE
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: LUNSFORD ANGSTADT, CAROLINE
Address: 1021 NW 6TH STREET
City-St-Zip: BOCA RATON, FL 33486

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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH LUNSFORD

CP

01/19/2009

Electronic Signature of Signing Officer or Director

Date