2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000000345

DAVIS, DOUGLAS C

417 BLACKLATCH LANE

CAMP HILL, PA 17011

Name:

Address:

City-St-Zip:

Entity Name: T3 GLOBAL STRATEGIES, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10 EMERSON LANE SUITE 808 BRIDGEVILLE, PA 15017 **New Mailing Address: Current Mailing Address:** 10 EMERSON LANE SUITE 808 BRIDGEVILLE, PA 15017 FEI Number: 25-1852484 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: NALE, DAVID **7560 NW 135TH STREET** REDDICK, FL 32686 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: () Change () Addition DAVIS, DOUG Name: Name: 417 BLACKLATCH LANE Address: Address: City-St-Zip: CAMP HILL, PA 17011 City-St-Zip: Title: VΡ Title: () Delete (X) Change () Addition Name: CHAPPELL, KEVIN Name: HARTMANN, HOWARD 10079 OAKRIDGE DRIVE 1530 HIGH KNOLLS DRIVE Address: Address: PITTSBURGH, PA 15241 City-St-Zip: WEXFORD, PA 15090 City-St-Zip: Title: (X) Change () Addition () Delete Title: VΡ STRAIGHT, LARRY STRAIGHT, LARRY Name: Name: 35 GLENWOOD DRIVE 35 GLENWOOD DRIVE Address: Address: City-St-Zip: WASHINGTON, PA 15301 City-St-Zip: WASHINGTON, PA 15301 Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: LARRY K STRAIGHT VP 04/15/2009