2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2009
Secretary of State

DOCUMENT# F08000000168

Entity Name: GREENLINK NETWORKS, INC.

Current Principal Place of Business:

620 ALLENDALE ROAD STE 100A
KING OF PRUSSIA, PA 19406

New Principal Place of Business:

640 FREEDOM DRIVE, SUITE 201
KING OF PRUSSIA, PA 19406

Current Mailing Address:

620 ALLENDALE ROAD STE 100A
KING OF PRUSSIA, PA 19406

New Mailing Address:

640 FREEDOM DRIVE, SUITE 201
KING OF PRUSSIA, PA 19406

FEI Number: 26-1172875 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 333240000 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete
Name: MALEWICZ, BRAIN T
Address: 620 ALLENDALE ROAD STE 100A
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: DS ( ) Delete
Name: JANNETTA, DAVID L
Address: 620 ALLENDALE ROAD STE 100A
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change ( ) Addition
Name: MALEWICZ, BRAIN T
Address: 640 FREEDOM DRIVE, SUITE 201
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: DS (X) Change ( ) Addition
Name: JANNETTA, DAVID L
Address: 640 FREEDOM DRIVE, SUITE 201
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: D ( ) Change (X) Addition
Name: BURNS, MICHAEL
Address: 640 FREEDOM DRIVE, SUITE 201
City-St-Zip: KING OF PRUSSIA, PA 19406

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: BRIAN MALEWICZ PTD 07/20/2009

Electronic Signature of Signing Officer or Director Date