

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001130

Entity Name: PSIGENICS CORPORATION

FILED
Feb 16, 2011
Secretary of State

Current Principal Place of Business:

2153 SE HAWTHORNE ROAD, STE 216
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

PO BOX 2160
GAINESVILLE, FL 32602

New Mailing Address:

FEI Number: 20-2209813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILBER, SCOTT A
2153 SE HAWTHORNE ROAD, STE 216
GAINESVILLE, FL 32641 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: PD
Name: WILBER, SCOTT A
Address: 2153 SE HAWTHORNE ROAD, STE 216
City-St-Zip: GAINESVILLE, FL 32641

Title: D
Name: JOFFE, DAVID
Address: 2153 SE HAWTHORNE ROAD, STE 216
City-St-Zip: GAINESVILLE, FL 32641

Title: ST
Name: TAYLOR, DEBORAH C
Address: 2153 SE HAWTHORNE ROAD, STE 216
City-St-Zip: GAINESVILLE, FL 32641

Title: D
Name: JASKOLSKI, COREY J
Address: 2153 SE HAWTHORNE ROAD, STE 216
City-St-Zip: GAINESVILLE, FL 32641

I hereby 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 all other like empowered.

SIGNATURE: SCOTT A WILBER

PD

02/16/2011

Electronic Signature of Signing Officer or Director

Date