

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001619

Entity Name: ZONAR SYSTEMS, INCORPORATED

FILED
Jan 16, 2009
Secretary of State

Current Principal Place of Business:

18200 CASCADE AVE S., SUITE 200
SEATTLE, WA 98188

New Principal Place of Business:

Current Mailing Address:

18200 CASCADE AVE S., SUITE 200
SEATTLE, WA 98188

New Mailing Address:

FEI Number: 26-0499050

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: P () Delete
Name: BRINTON, BRETT
Address: 18200 CASCADE AVE S., SUITE 200
City-St-Zip: SEATTLE, WA 98188

Title: VP () Delete
Name: MCQUADE, MIKE
Address: 18200 CASCADE AVE S., SUITE 200
City-St-Zip: SEATTLE, WA 98188

Title: S () Delete
Name: MAYER, DAN
Address: 18200 CASCADE AVE S., SUITE 200
City-St-Zip: SEATTLE, WA 98188

Title: T () Delete
Name: BRINTON, BILL
Address: 18200 CASCADE AVE S., SUITE 200
City-St-Zip: SEATTLE, WA 98188

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:

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

SIGNATURE: BRETT BRINTON

PRES

01/16/2009

Electronic Signature of Signing Officer or Director

Date