2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 09, 2009
Secretary of State

DOCUMENT# F08000003100

Entity Name: APEXUS, INC.

Current Principal Place of Business:

125 E. JOHN CARPENTER FWY.
IRVING, TX 75062

New Principal Place of Business:

125 E. JOHN CARPENTER FWY.
APEXUS, 14TH FLOOR
IRVING, TX 75062

Current Mailing Address:

125 E. JOHN CARPENTER FWY.
IRVING, TX 75062

New Mailing Address:

125 E. JOHN CARPENTER FWY.
APEXUS, 14TH FLOOR
IRVING, TX 75062

FEI Number: 26-0714750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	( ) Delete
Name:	PETERSEN, ELDON	
Address:	125 E. JOHN CARPENTER FWY.	
City-St-Zip:	IRVING, TX 75062	
Title:	D	( ) Delete
Name:	ANDERSON, MARY L	
Address:	41 BERNARD BLVD.	
City-St-Zip:	HOCKESSIN, DE 19707	
Title:	D	( ) Delete
Name:	FELIX, TONY	
Address:	839 WEST CONGRESS	
City-St-Zip:	TUSCON, AZ 85745	
Title:	V	( ) Delete
Name:	HATWIG, CHRISTOPHER	
Address:	125 E. JOHN CARPENTER FWY.	
City-St-Zip:	IRVING, TX 75062	
Title:	D	( ) Delete
Name:	WOLLER, THOMAS	
Address:	2900 W. OKLAHOMA AVENUE	
City-St-Zip:	MILWAUKEE, WI 53201	
Title:	D	( ) Delete
Name:	WOODWARD, BILL	
Address:	16 EAST AVENUE A	
City-St-Zip:	TEMPLE, TX 76501	

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:	
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: CHRISTOPHER A. HATWIG VP 06/09/2009
Electronic Signature of Signing Officer or Director — Date