

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004687

FILED
Apr 14, 2009
Secretary of State

Entity Name: PENNSYLVANIA NETWORKS, INC.

Current Principal Place of Business:

21334 CROGHAN PIKE, SUITE 2
ORBISONIA, PA 17243

New Principal Place of Business:

Current Mailing Address:

21334 CROGHAN PIKE, SUITE 2
ORBISONIA, PA 17243

New Mailing Address:

8240 PRESTON COURT
SUITE C
JESSUP, MD 20794

FEI Number: 52-2078541

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROOKS, RANDALL
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

Title: VP () Delete
Name: DOYLE, DOUG
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

Title: S () Delete
Name: HALLE, ANNA
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

Title: T () Delete
Name: GOODE, JOHN
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

Title: CFO () Delete
Name: GOODE, JOHN
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BROOKS, RANDALL
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: SEC (X) Change () Addition
Name: HALLE, ANNA
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

Title: TR (X) Change () Addition
Name: GOODE, JOHN
Address: 8240 PRESTON COURT, SUITE C
City-St-Zip: JESSUP, MD 20794

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: JOHN GOODE

CFO

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date