2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005035

Entity Name: VIRGINIA TECH FOUNDATION, INC.

FILED Jan 13, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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902 PRICES FORK ROAD, SUITE 2600 902 PRICES FORK ROAD BLACKSBURG, VA 24061 SUITE 2600

BLACKSBURG, VA 24061

Current Mailing Address: New Mailing Address:

902 PRICES FORK ROAD, SUITE 2600 902 PRICES FORK ROAD SUITE 2600 SUITE 2600 BLACKSBURG, VA 24061

FEI Number: 54-0721690 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SMOOT, JR., RAYMOND D DR. SMOOT, RAYMOND D DR Name: Name: 902 PRICES FORK RD, SUITE 4000 Address: 902 PRICES FORK ROAD, SUITE 4000 Address: City-St-Zip: BLACKSBURG, VA 24061 City-St-Zip: BLACKSBURG, VA 24061 Title: COO Title: () Delete () Change () Addition

 Name:
 SMOOT, JR., RAYMOND D DR.
 Name:

 Address:
 902 PRICES FORK RD, SUITE 4000
 Address:

 City-St-Zip:
 BLACKSBURG, VA 24061
 City-St-Zip:

Title: PCEO () Delete Title: () Change () Addition

Name:PRYOR, JR., CHRLES W DR.Name:Address:1164 PRYOR RIDGE TRAILAddress:City-St-Zip:LYNCHBURG, VA 24503City-St-Zip:

Title: EVP () Delete Title: () Change () Addition

 Name:
 FLANAGAN, ELIZABETH A DR.
 Name:

 Address:
 315 BURRUSS HALL (0253)
 Address:

 City-St-Zip:
 BLACKSBURG, VA 24061
 City-St-Zip:

Title: EVP () Delete Title: () Change () Addition

 Name:
 SHELTON, JR., M. DWIGHT
 Name:

 Address:
 210 BURRUSS HALL (0174)
 Address:

 City-St-Zip:
 BLACKSBURG, VA 24061
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ARCHER, ROBERT A
 Name:

 Address:
 PO BOX 700
 Address:

 City-St-Zip:
 SALEM, VA 24153
 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: RAYMOND D. SMOOT, JR. DR. 01/13/2009