

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000005478

Entity Name: VECTRONIX INC.

FILED
Feb 03, 2009
Secretary of State

Current Principal Place of Business:

801 SYCOLIN ROAD SE, SUITE 206
LEESBURG, VA 20175

New Principal Place of Business:

Current Mailing Address:

801 SYCOLIN ROAD SE, SUITE 206
LEESBURG, VA 20175

New Mailing Address:

FEI Number: 52-1391361

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 32301 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: C () Delete
Name: WHITE, JERRY A
Address: SUITE 614, 233 12TH STREET
City-St-Zip: COLUMBUS, GA 31901

Title: VC () Delete
Name: GORDEN, FRED
Address: 500 N FIELDS PASS
City-St-Zip: ALPHARETTA, GA 30004

Title: DS () Delete
Name: DUNNILL, WILLIAM
Address: 1015 FERNELIFF ROAD
City-St-Zip: LITTLETON, NC 27850

Title: DPCE () Delete
Name: BUCKLEY, DAVID M
Address: 801 SYCOLIN ROAD SE, SUITE 206
City-St-Zip: LEESBURG, VA 20175

Title: V () Delete
Name: HUTH, EDWIN M
Address: 801 SYCOLIN ROAD SE, SUITE 206
City-St-Zip: LEESBURG, VA 20175

Title: T () Delete
Name: BOILLLOT, THIERRY
Address: 1145 BROADWAY PLAZA, SUITE 200
City-St-Zip: TACOMA, WA 98402

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

SIGNATURE: EDWIN HUTH

V

02/03/2009

Electronic Signature of Signing Officer or Director

Date