

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F94000005029

**FILED**  
**May 18, 2009**  
**Secretary of State****Entity Name:** FAHLGREN, INC.**Current Principal Place of Business:**600 CORPORATE DRIVE, STE. 505  
FT. LAUDERDALE, FL 33334 US**New Principal Place of Business:**200 SW FIRST AVENUE  
SUITE 950  
FT. LAUDERDALE, FL 33301 US**Current Mailing Address:**P.O. BOX 1628  
PARKERSBURG, WV 261021628 US**New Mailing Address:****FEI Number:** 55-0736802      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CASTILLO, MIKE  
600 CORP DRIVE  
SUITE 505  
FORT LAUDERDALE, FL 33334 US**Name and Address of New Registered Agent:**CASTILLO, MIKE  
200 SW FIRST AVENUE  
SUITE 950  
FORT LAUDERDALE, FL 33301 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

05/18/2009

\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** PC      ( ) Delete  
**Name:** DRONGOWSKI, STEPHEN  
**Address:** 4030 EASTON STATION SUITE 300  
**City-St-Zip:** COLUMBUS, OH 43219 US**Title:** VCOO      ( ) Delete  
**Name:** HOLBERT, BRENT L  
**Address:** 4030 EASTON STATION SUITE300  
**City-St-Zip:** COLUMBUS, OH 43219 US**Title:** C      ( ) Delete  
**Name:** FAHLGREN, H S  
**Address:** 418 GRAND PARK DR STE 321  
**City-St-Zip:** PARKERSBURG, WV 261054000 US**Title:** V      ( ) Delete  
**Name:** MCDANIEL, MARGARET  
**Address:** 600 CORPORATE DRIVE SUITE 505  
**City-St-Zip:** FORT LAUDERDALE, FL 33334 US**Title:** V      ( ) Delete  
**Name:** LESSIG, C. RENEE  
**Address:** 418 GRAND PARK DR SUITE 321  
**City-St-Zip:** PARKERSBURG, WV 261054000 US**Title:** V      ( ) Delete  
**Name:** CASTILLO, MIKE  
**Address:** 600 CORPORATE DRIVE SUITE 505  
**City-St-Zip:** FORT LAUDERDALE, FL 33334**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:** V      (X) Change ( ) Addition  
**Name:** MCDANIEL, MARGARET  
**Address:** 200 SW FIRST AVENUE, SUITE 950  
**City-St-Zip:** FORT LAUDERDALE, FL 33301 US**Title:**      ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** V      (X) Change ( ) Addition  
**Name:** CASTILLO, MIKE  
**Address:** 200 SW FIRST AVENUE, SUITE 950  
**City-St-Zip:** FORT LAUDERDALE, FL 33301 US

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: C. RENEE LESSIG

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

VP

05/18/2009

\_\_\_\_\_  
Date