

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000006430

Entity Name: MINOS MANAGERS, INC.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

1105 N FEDERAL HWY
BOYNTON BEACH, FL 33435

New Principal Place of Business:

1005 LAKE AVENUE
#301
LAKE WORTH, FL 33460

Current Mailing Address:

1180 SEMINOLE TRAIL
SUITE 155
CHARLOTTESVILLE, VA 22901

New Mailing Address:

FEI Number: 65-0711487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORICK, SANDI
1105 N GEDERAL HWY
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

MORICK, SANDI
1005 LAKE AVENUE
#301
LAKE WORTH, FL 33460 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: _____

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GOODYEAR, KIMBERLY A
Address: 1180 SEMINOLE TRAIL, STE 155
City-St-Zip: CHARLOTTESVILLE, VA 22901

Title: CD () Delete
Name: WORRELL, THOMAS E JR
Address: 1105 N FEDERAL HWY
City-St-Zip: BOYNTON BEACH, FL 33435

Title: ST () Delete
Name: FOELLMER, GLORIA
Address: 1180 SEMINOLE TRAIL, STE 155
City-St-Zip: CHARLOTTESVILLE, VA 22901

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:

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: KIMBERLY GOODYEAR

PD

01/14/2009

Electronic Signature of Signing Officer or Director

Date