2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000006442

Entity Name: FLORIDA TEC INC

FILED Mar 16, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: PO BOX 5127 2496 OLD IVY ROAD CHARLOTTESVILLE, VA 22905 SUITE 300 CHARLOTTESVILLE, VA 22903 **Current Mailing Address: New Mailing Address:** PO BOX 5127 CHARLOTTESVILLE, VA 22905 FEI Number: 54-1524820 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition CORNELIUS, RICHARD M CORNELIUS, RICHARD M Name: Name: 2496 OLD IVY ROAD, SUITE 300 2496 OLD IVY ROAD, SUITE 300 Address: Address: City-St-Zip: CHARLOTTESVILLE, VA 22903 City-St-Zip: CHARLOTTESVILLE, VA 22903 Title: Title: () Delete () Change () Addition Name: HEIDERSTADT, RICHARD T Name: 2496 OLD IVY ROAD, SUITE 300 Address: Address: CHARLOTTESVILLE, VA 22903 City-St-Zip: City-St-Zip: Title: Title: DV () Delete () Change () Addition WILSON, JACK E Name: Name: 2496 OLD IVY ROAD, SUITE 300 Address: Address: CHARLOTTESVILLE, VA 22903 City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition MONTOYA, BENJAMIN F Name: Name: Address: 4361 WHISPERING OAKS CIRCLE Address: City-St-Zip: GRANITE BAY, CA 95746 City-St-Zip: Title: S/T Title: () Delete () Change () Addition NELSON, DONALD E Name: Name: 2496 OLD IVY ROAD SUITE 300 Address: Address: City-St-Zip: CHARLOTTESVILLE, VA 22903 City-St-Zip: Title: () Delete Title: () Change () Addition VILLNOW, JEFFERY Name: Name: 1450 114TH AVENUE SE SUITE 200 Address: Address: City-St-Zip: City-St-Zip: BELLEVUE, WA 98004

SIGNATURE: DONALD E. NELSON S/T 03/16/2007

I hereby certify that the information supplied with this filing does not qualify for the 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.