

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006084

FILED
Mar 05, 2009
Secretary of State

Entity Name: UTEK CORPORATION

Current Principal Place of Business:

2109 E PALM AVENUE
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

2109 E PALM AVENUE
TAMPA, FL 33605

New Mailing Address:

FEI Number: 59-3603677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REIBER, SAM I
2109 E. PALM AVE
TAMPA, FL 33605 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: CEO () Delete
Name: GROSS, CLIFFORD M PHD
Address: 2109 EAST PALM AVENUE
City-St-Zip: TAMPA, FL 33605

Title: D () Delete
Name: GYIMAH-BREMPOG, KWABENA PHD
Address: 2109 EAST PALM AVENUE
City-St-Zip: TAMPA, FL 33605

Title: D () Delete
Name: CHAPNIK, ARTHUR
Address: 2109 E. PALM AVENUE
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: WITTER, KEITH
Address: 2109 E. PALM AVENUE
City-St-Zip: TAMPA, FL 33605

Title: D () Delete
Name: MICEK, JOHN
Address: 2109 EAST PALM AVENUE
City-St-Zip: TAMPA, FL 33605

Title: CFO () Delete
Name: WRIGHT, CAROLE
Address: 2109 E. PALM AVENUE
City-St-Zip: TAMPA, FL 33605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SCHAEGLER, DOUG
Address: 2109 EAST PALM AVENUE
City-St-Zip: TAMPA, FL 33605

Title: VP (X) Change () Addition
Name: REIBER, SAM
Address: 2109 EAST PALM AVENUE
City-St-Zip: TAMPA, FL 33605

Title: D (X) Change () Addition
Name: CALLEN HAMILTON, HOLLY
Address: 2109 E. PALM AVENUE
City-St-Zip: TAMPA, FL 33609

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: CAROLE R, WRIGHT

CFO

03/05/2009

Electronic Signature of Signing Officer or Director

Date