

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G51999

Entity Name: OPEN ROAD, INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

135 E MIRACLE STRIP PARKWAY
MARY ESTHER, FL 32569

New Principal Place of Business:

Current Mailing Address:

135 E MIRACLE STRIP PARKWAY
MARY ESTHER, FL 32569

New Mailing Address:

FEI Number: 59-2309380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORZINE, LINDA J.
486 PARRISH BLVD.
MARY ESTHER, FL 32569 US

Name and Address of New Registered Agent:

CORZINE, LINDA J.
486 PARISH BLVD.
MARY ESTHER, FL 32569 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: LINDA J. CORZINE

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: CORZINE, JACK W
Address: 486 PARISH BLVD.
City-St-Zip: MARY ESTHER, FL 32569

Title: D () Delete
Name: CORZINE, LINDA J.
Address: 486 PARISH BLVD.
City-St-Zip: MARY ESTHER, FL 32569

Title: D () Delete
Name: PIKE, KENNETH
Address: 25 NEPTUNE DR
City-St-Zip: MARY ESTHER, FL

Title: D () Delete
Name: PIKE, MARILYN
Address: 25 NEPTUNE DR
City-St-Zip: MARY ESTHER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: CORZINE, JACK W
Address: 486 PARISH BLVD.
City-St-Zip: MARY ESTHER, FL 32569

Title: DS (X) Change () Addition
Name: CORZINE, LINDA J
Address: 486 PARISH BLVD.
City-St-Zip: MARY ESTHER, FL 32569

Title: DVP (X) Change () Addition
Name: PIKE, KENNETH W
Address: 25 NEPTUNE DR
City-St-Zip: MARY ESTHER, FL 32569

Title: DT (X) Change () Addition
Name: PIKE, MARILYN E
Address: 25 NEPTUNE DR
City-St-Zip: MARY ESTHER, FL 32569

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: JACK W. CORZINE

P

04/20/2009

Electronic Signature of Signing Officer or Director

Date