

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G70725

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: CONTROLLED RELEASE TECHNOLOGIES, INC.

## Current Principal Place of Business:

1016 INDUSTRY DR.  
SHELBY, NC 28152 US

## New Principal Place of Business:

## Current Mailing Address:

1016 INDUSTRY DRIVE  
SHELBY, NC 28152 US

## New Mailing Address:

1016 INDUSTRY DR.  
SHELBY, NC 28152 US

FEI Number: 59-2743360

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PHALIN, LAWRENCE  
225 E. ROBINSON ST. # 600  
ORLANDO, FL 32801 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: P ( ) Delete  
Name: BURKHART, LYNN  
Address: 3125 SANDIE DR.  
City-St-Zip: SHELBY, NC 28150

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BURKHART, LYNN W  
Address: 3125 SANDIE DR.  
City-St-Zip: SHELBY, NC 28150

Title: ED ( ) Change (X) Addition  
Name: BURKHART, PATRICIA A  
Address: 1016 INDUSTRY DR  
City-St-Zip: SHELBY, NC 281552

Title: MGR ( ) Change (X) Addition  
Name: TINLEY, RACHELLE L  
Address: 1016 INDUSTRY DR  
City-St-Zip: SHELBY, NC 28152

Title: CEO ( ) Change (X) Addition  
Name: BURKHART, LYNN W  
Address: 3125 SANDIE DR  
City-St-Zip: SHELBY, NC 28150

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: PATRICIA BURKHART

ED

01/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date