

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H22390

Entity Name: PRESSIE CORP.

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

% WILLIAM B. WOOD
P.O. BOX 8041
COCOA, FL 329245041

New Principal Place of Business:

% WILLIAM B. WOOD
1300 MULLETT LN
COCOA, FL 32926

Current Mailing Address:

% WILLIAM B. WOOD
P.O. BOX 8041
COCOA, FL 329245041

New Mailing Address:

FEI Number: 59-2451132

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, WILLIAM B.
115 RUTH AVENUE
COCOA, FL 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: DP () Delete
Name: WOOD, WILLIAM B.,
Address: 115 RUTH AVE
City-St-Zip: COCOA, FL 32923

Title: DV () Delete
Name: HUNT, JAMES R
Address: 1300 MULLETT LANE
City-St-Zip: COCOA, FL 32926

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WILLIAM B WOOD

DP

01/15/2009

Electronic Signature of Signing Officer or Director

Date