

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J67120

Entity Name: SALZBURG, INC.

FILED  
Apr 21, 2009  
Secretary of State

## Current Principal Place of Business:

2100 S TAMiami TRL.  
SARASOTA, FL 34239 US

## New Principal Place of Business:

## Current Mailing Address:

2100 S TAMiami TRL.  
SARASOTA, FL 34239 US

## New Mailing Address:

FEI Number: 59-2793386

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHOAF, MARGARET  
2100 S TAMiami TR #200  
SARASOTA, FL 34239 US

## Name and Address of New Registered Agent:

SHOAF, MARGARET  
2100 S TAMiami TR  
SUITE 200  
SARASOTA, FL 34239 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:

04/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SHOAF, MARGARET  
Address: 2100 S TAMiami TR 200  
City-St-Zip: SARASOTA, FL 34239

Title: VPTD ( ) Delete  
Name: HEINE, CHRISTA  
Address: 2100 S TAMiami TR 200  
City-St-Zip: SARASOTA, FL 34239

Title: S ( ) Delete  
Name: HEINE BERND  
Address: 2100 S TAMiami TR 200  
City-St-Zip: SARASOTA, FL 34239

Title: VP ( ) Delete  
Name: LEHNEN, SILKE  
Address: 2100 S TAMiami TR 200  
City-St-Zip: SARASOTA, FL 34239

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SHOAF, MARGARET  
Address: 2100 S TAMiami TR STE 200  
City-St-Zip: SARASOTA, FL 34239

Title: VPTD (X) Change ( ) Addition  
Name: HEINE, CHRISTA  
Address: 2100 S TAMiami TR STE 200  
City-St-Zip: SARASOTA, FL 34239

Title: S (X) Change ( ) Addition  
Name: HEINE BERND  
Address: 2100 S TAMiami TR STE 200  
City-St-Zip: SARASOTA, FL 34239

Title: VP (X) Change ( ) Addition  
Name: LEHNEN, SILKE  
Address: 2100 S TAMiami TR STE 200  
City-St-Zip: SARASOTA, FL 34239

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: MARGARET SHOAF, CPA

RA

04/21/2009

Electronic Signature of Signing Officer or Director

Date