

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M08330

FILED
Mar 20, 2009
Secretary of State

Entity Name: PEGASUS TECHNOLOGIES, INC.

Current Principal Place of Business:

932 PILOT DRIVE
GREEN COVE SPRINGS, FL 32043

New Principal Place of Business:

Current Mailing Address:

PEGASUS TECHNOLOGIES
932 PILOT DR.
GREEN COVE SPRINGS, FL 32043

New Mailing Address:

FEI Number: 59-2538042 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILSON, DALE S
718 NORTH ORANGE AVENUE
GREEN COVE SPRINGS, FL 32043 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: D () Delete
Name: LUDWIG, JEFFREY R
Address: 5150 BELFORT RD., BLDG 500
City-St-Zip: JACKSONVILLE, FL 32256

Title: V () Delete
Name: GREEN, WILLIAM
Address: REYNOLDS IND. PK. HWY 16
City-St-Zip: GREEN COVE SPRGS, FL

Title: ST () Delete
Name: WILSON, DALE S
Address: 718 NORTH ORANGE AVENUE
City-St-Zip: GREEN COVE SPRGS, FL 32043

Title: D () Delete
Name: AGEE, MICHELLE
Address: 783 CREIGHTON ROAD
City-St-Zip: ORANGE PARK, FL 32003

Title: D () Delete
Name: TRONE, DONALD
Address: 12401 SAN VICTORIA NE
City-St-Zip: ALBUQUERQUE, NM 87111

Title: P () Delete
Name: SHAW, JIMMY
Address: 12724 WESTPORT CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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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: RANDY W. KNOTTS

GM

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date