2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001522

FILED Jan 19, 2009 Secretary of State

Entity Name: PROGRAMMABLE LOGIC USER GROUP, INC.

10200 121	rincipal Place of Business:	New Princ	ipal Place of Business:
_ARGO, F	ST STREET L 33774		
Current N	lailing Address:	New Maili	ng Address:
10380 131 _ARGO, F	ST STREET L 33774		
FEI Number	։ 01-0624067 FEI Number Aբ	oplied For () FEI Number Not Appl	cable () Certificate of Status Desired ()
Name and	l Address of Current Registe	ered Agent: Name and	Address of New Registered Agent:
10380 131 _ARGO, F			
	e named entity submits this sta e of Florida.	tement for the purpose of changing it	s registered office or registered agent, or both,
SIGNATU			
	Electronic Signature of	Registered Agent	Date
OFFICER	S AND DIRECTORS:	ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS
Fitle: Name: Address: City-St-Zip:	D () Delete KILLINGSWORTH, JACK 10380 131ST STREET LARGO, FL 33774	Title: Name: Address: City-St-Zip:	() Change () Addition
Fitle: Name: Address: City-St-Zip:	D () Delete LUMIA, JAMES 3301 W BARCELONA STREET TAMPA, FL 33629	Title: Name: Address: City-St-Zip:	()Change()Addition
Name: Address:	LUMIA, JAMÉS 3301 W BARCELONA STREET	Name: Address:	() Change () Addition () Change () Addition
Name: Address: City-St-Zip: Fitle: Name: Address:	LUMIA, JAMES 3301 W BARCELONA STREET TAMPA, FL 33629 PD () Delete BELVIN, STEVE 13265 108TH AVENUE	Name: Address: City-St-Zip: Title: Name: Address:	
Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	LUMIA, JAMES 3301 W BARCELONA STREET TAMPA, FL 33629 PD () Delete BELVIN, STEVE 13265 108TH AVENUE LARGO, FL 33774 PD () Delete KIMMERY, CLIFFORD E 2045 SUNSET GROVE LANE	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	()Change()Addition

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM WEDLAKE TD 01/19/2009