2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001459

FILED Jan 05, 2010 Secretary of State

Entity Name: EXPERIMENTAL SKELETON INC.

Current Principal Place of Business: New Principal Place of Business:

112 N. MULRENNAN RD.

VALRICO, FL 33594

112 N MULRENNAN ROAD
VALRICO, FL 33594

VALRICO, FL 33594

Current Mailing Address: New Mailing Address:

112 N. MULRENNAN RD.
VALRICO, FL 33594

112 N MULRENNAN ROAD
VALRICO, FL 33594

FEI Number: 20-2345349 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DORSEY, BOB
112 N. MULRENNAN RD.
VALRICO, FL 33594 US
DORSEY, BOB
112 N MULRENNAN ROAD
VALRICO, FL 33594 US
VALRICO, FL 33594 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: 01/05/2010

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP

 Name:
 GRIFFITH, JOE

 Address:
 2929 N. 15TH STREET

 City-St-Zip:
 TAMPA, FL 33605

Title: DS

Name: ODONNELL, KYM Address: 2929 N. 15TH STREET City-St-Zip: TAMPA, FL 33605

Title:

Name: DORSEY, BOB

Address: 112 N MULRENNAN ROAD City-St-Zip: VALRICO, FL 33594

Title: DV

Name: TAYLOR, BRIAN Address: 918 E ST CLAIR City-St-Zip: TAMPA, FL 33605

Title: DT

 Name:
 TAYLOR, ANN-ELIZA

 Address:
 918 E ST CLAIR

 City-St-Zip:
 TAMPA, FL 33605

I hereby 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 all other like empowered.

SIGNATURE: BOB DORSEY D 01/05/2010