

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000003836

FILED
Apr 16, 2009
Secretary of State

Entity Name: PERPETUAL MOVEMENT INC.

Current Principal Place of Business:

6611 APPALOOSA DRIVE
TAMPA, FL 33625

New Principal Place of Business:

Current Mailing Address:

6611 APPALOOSA DRIVE
TAMPA, FL 33625

New Mailing Address:

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

Name and Address of Current Registered Agent:

THOMAS, VINCENT J
6611 APPALOOSA DRIVE
TAMPA, FL 33625 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VINCENT J. THOMAS
Address: 6611 APPALOOSA DRIVE
City-St-Zip: TAMPA, FL 33625

Title: D () Delete
Name: THOMAS, TAISSA L
Address: 6611 APPALOOSA DRIVE
City-St-Zip: TAMPA, FL 33625

Title: D () Delete
Name: SANDERS, ERIC
Address: 3230 FOX LAKE DRIVE
City-St-Zip: TAMPA, FL 33618 US

Title: T () Delete
Name: SHEEHY, JR., PAUL DR
Address: 812 W. MARTIN LUTHER KING ST.
City-St-Zip: TAMPA, FL 33625 US

Title: T () Delete
Name: MORA, MONICA
Address: 15310 HEATHRIDGE DRIVE
City-St-Zip: TAMPA, FL 33625

Title: T (X) Delete
Name: ROBINSON, AARON
Address: 364 WEAVER STREET
City-St-Zip: DAYTONA BEACH, FL 32114

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

SIGNATURE: VINCENT J. THOMAS

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date