## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000004564

Entity Name: HIGHER POWERED, INC.

FILED Apr 16, 2009 Secretary of State

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

1556 EASTBROOK DRIVE SARASOTA, FL 34231

**Current Mailing Address: New Mailing Address:** 

1556 EASTBROOK DRIVE SARASOTA, FL 34231

FEI Number: 26-2594814 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:

TISHMAN, MARK L 1556 EASTBROOK DRIVE SARASOTA, FL 34231

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition TISHMAN, MARK L Name: TISHMAN, MARK L Name:

Address: 1556 EASTBROOK DRIVE Address: 1556 EASTBROOK DRIVE SARASOTA, FL 34231 City-St-Zip: City-St-Zip: SARASOTA, FL 34231

Title: (X) Delete Title: () Change () Addition

Name: BENEDICT, DAVID D Name: Address: 707 67TH AVENUE WEST Address: City-St-Zip: BRADENTON, FL 34207 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

RAPCZYNSKI, KENNETH Name: Name: 3583 BENEVA LANE Address: Address: City-St-Zip: SARASOTA, FL 34231 City-St-Zip:

Title: (X) Delete Title: () Change () Addition

MANDELL, TODD W Name: Name: 1825 HIBISCUS STREET Address: Address: City-St-Zip: SARASOTA, FL 34239 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: MARK L. TISHMAN CPST 04/16/2009