

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000020317

Entity Name: IHEADHUNT.CC, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

200 S CENTRAL AVE
SUITE 3000
OVIEDO, FL 32765 US

New Principal Place of Business:

200 S CENTRAL AVE
SUITE 2000
OVIEDO, FL 32765 US

Current Mailing Address:

23 ALAFAYA WOODS BLVD.
196
OVIEDO, FL 32765 US

New Mailing Address:

FEI Number: 59-3632685 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEG, CHRISTIAN
23 ALAFAYA WOODS BLVD
196
OVIEDO, FL 32765 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: FERRELL, JAMES W
Address: 1400 W FAIRBANKS AVE STE 102
City-St-Zip: WINTER PARK, FL 32789

Title: ST () Delete
Name: SIEG, CHRISTIAN M
Address: 23 ALAFAYA WOODS BLVD #196
City-St-Zip: OVIEDO, FL 32765

Title: VP () Delete
Name: MITCHELL, JAMES
Address: 23 ALAFAYA WOODS BLVD #196
City-St-Zip: OVIEDO, FL 32765

Title: P () Delete
Name: LOFGREN, PETER J
Address: 23 ALAFAYA WOODS BLVD #196
City-St-Zip: OVIEDO, FL 32765

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
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: PETER LOFGREN

P

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date