2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000089909

Entity Name: AGGREGATE SYSTEMS, INC

LAKELAND, FL 33812

City-St-Zip:

FILED Feb 04, 2009 Secretary of State

Littley Na	ine. Addite	DATE OTOTEWO, INC.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
	AL COURT N D, FL 33812	ORTH			
Current Mailing Address:			New Mailing Address:		
3604 ROY. LAKELANI	AL COURT N D, FL 33812	ORTH			
FEI Number:	: 59-3741982	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
3604 ROÝ. LAKELANI	CHARLES M AL COURT N D, FL 33812	US			
in the State	named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered A	gent	Date	
Election Car	npaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	HOWELL, CHA	COURT NORTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	HOWELL, BOI) Delete NIE E COURT NORTH	Title: Name: Address:	() Change () Addition	

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: BONNIE E HOWELL VTD 02/04/2009