

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000003889

Entity Name: CLOUDYREASON, INC.

FILED  
Jan 06, 2011  
Secretary of State

**Current Principal Place of Business:**

475 NW 7TH STREET  
BOCA RATON, FL 33432

**New Principal Place of Business:**

722 WENTWORTH ST  
SEBASTIAN, FL 32958

**Current Mailing Address:**

475 NW 7TH STREET  
BOCA RATON, FL 33432

**New Mailing Address:**

722 WENTWORTH ST  
SEBASTIAN, FL 32958

FEI Number: 26-0013830

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BAER, MICHELE PRES  
475 NW 7TH STREET  
BOCA RATON, FL 33432 US

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

BAER, MICHELE PRES  
722 WENTWORTH ST  
SEBASTIAN, FL 32958 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: MICHAEL BAER

01/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: O  
Name: BAER, MARLA VP  
Address: 144 ANCHOR PT  
City-St-Zip: DELRAY BEACH, FL 33444

Title: O  
Name: BAER, MICHELE PRES  
Address: 475 NW 7TH STREET  
City-St-Zip: BOCA RATON, FL 33432

Title: O  
Name: BAER, GERRITT F CTO  
Address: 2730 WORCHESTER RD  
City-St-Zip: LAKE WORTH, FL 334623872

Title: O  
Name: BAER, MICHAEL G CFO  
Address: 722 WENTWORTH ST  
City-St-Zip: SEBASTIAN, FL 32958

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

SIGNATURE: MICHAEL BAER

O

01/06/2011

Electronic Signature of Signing Officer or Director

Date