

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090445

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** SCORPION INVESTMENT CORPORATION

**Current Principal Place of Business:**

242 SW 5TH ST  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

242 SW 5TH ST  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:** 36-4505201      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

WILLIAMSON, TRAVIS R  
242 SW 5TH ST  
POMPANO BEACH, FL 33060      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: PCT  
Name: WILLIAMSON, TOLEIHA L  
Address: 242 SW 5TH ST  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VDS  
Name: WILLIAMSON, TRAVIS R  
Address: 242 SW 5TH ST  
City-St-Zip: POMPANO BEACH, FL 33060

Title: VD  
Name: WILLIAMSON, LANCE C  
Address: 242 SW 5TH ST  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D  
Name: WILLIAMSON, SHANE L  
Address: 242 SW 5TH ST  
City-St-Zip: POMPANO BEACH, FL 33060

Title: D  
Name: WILLIAMSON, JARED L  
Address: 242 SW 5TH ST  
City-St-Zip: POMPANO BEACH, FL 33060

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: TRAVIS R. WILLIAMSON

V

04/30/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date