

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000048769

FILED
Mar 14, 2008
Secretary of State

Entity Name: AVALANCHE TECHNOLOGY CORPORATION

Current Principal Place of Business:

1020 EAST LAFAYETTE ST.
SUITE 106
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

1020 EAST LAFAYETTE ST.
SUITE 106
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 20-0016204

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FALLIGANT, FRANCIS B JR.
1505 BENT OAKS BLVD.
DELAND, FL 32724 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: P () Delete
Name: HENDRICKS, WYATT
Address: 1313 TOM STILL RD.
City-St-Zip: TALLAHASSEE, FL 32305

Title: SEC () Delete
Name: SCHAMP, ANN L
Address: 11 SOUTH BUMBY ST.
City-St-Zip: ORLANDO, FL 32325

Title: D () Delete
Name: RICHEY, MARGARET
Address: 1616 TALPECO RD.
City-St-Zip: TALLAHASSEE, FL 32303

Title: TRE () Delete
Name: FALLIGANT, FRANCIS B CFO
Address: 1505 BENT OAKS BLVD
City-St-Zip: DELAND, FL 32724

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: FRANCIS B FALLIGANT

TRE

03/14/2008

Electronic Signature of Signing Officer or Director

Date