

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000135160

Entity Name: COFACTOR TECHNOLOGIES, INC.

FILED  
Mar 13, 2008  
Secretary of State

## Current Principal Place of Business:

2002 BLIND POND AVE  
LUTZ, FL 33549

## New Principal Place of Business:

## Current Mailing Address:

2002 BLIND POND AVE  
LUTZ, FL 33549

## New Mailing Address:

FEI Number: 20-0402066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WERNER, JONATHAN G  
2002 BLIND POND AVE  
LUTZ, FL 33549 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: PVST ( ) Delete  
Name: WERNER, JONATHAN G  
Address: 2002 BLIND POND AVE  
City-St-Zip: LUTZ, FL 33549

Title: D ( ) Delete  
Name: WERNER, JONATHAN G  
Address: 2002 BLIND POND AVE  
City-St-Zip: LUTZ, FL 33549

Title: TD ( ) Delete  
Name: WERNER, DENNIS C  
Address: 8634 CHADWICK DRIVE  
City-St-Zip: TAMPA, FL 33635

Title: SD ( ) Delete  
Name: CAMPBELL, ROBERT  
Address: 2516 WEST SUNRISE DRIVE  
City-St-Zip: TAMPA, FL 33629

## 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: JONATHAN G. WERNER

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03/13/2008

Electronic Signature of Signing Officer or Director

Date