

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000000764

Entity Name: COGON SYSTEMS, INC.

FILED  
Apr 28, 2009  
Secretary of State

## Current Principal Place of Business:

17 SO PALAFOX PL STE 300  
PENSACOLA, FL 32502

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 13025  
PENSACOLA, FL 325913025

## New Mailing Address:

FEI Number: 20-0547921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEGGS & LANE, RLLP  
501 COMMENDENCIA ST  
PENSACOLA, FL 32502 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: D ( ) Delete  
Name: HENSELMANN, BARBARA  
Address: 1019 WIND CHIME WAY  
City-St-Zip: PENSACOLA, FL 32503

Title: PCD ( ) Delete  
Name: NGUYEN, HUY B CEO  
Address: 1019 WIND CHIME WAY  
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete  
Name: CRAIN, PHIL  
Address: 5545 OAKMONT DRIVE  
City-St-Zip: PACE, FL 32571

Title: D (X) Delete  
Name: KELLY, ROBERT ADM  
Address: 2031 CROWN POINTE BLVD  
City-St-Zip: PENSACOLA, FL 32506

Title: D ( ) Delete  
Name: MARCUS, STEVE  
Address: 20411 NEW 22 PLACE  
City-St-Zip: AVENTURA, FL 33180

Title: S (X) Delete  
Name: COTTON, KATHY SEC  
Address: 9 CYPRESS POINT WEST  
City-St-Zip: PENSACOLA, FL 32514

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: HENSELMANN, BARBARA  
Address: 154 ETHEL WINGATE DRIVE  
City-St-Zip: PENSACOLA, FL 32507

Title: PCD (X) Change ( ) Addition  
Name: NGUYEN, HUY B CEO  
Address: 154 ETHEL WINGATE DRIVE  
City-St-Zip: PENSACOLA, FL 32507

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: HUY NGUYEN

CEO

04/28/2009

Electronic Signature of Signing Officer or Director

Date