

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000065184

Entity Name: FUGIT, INC.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

457 SOUTH RIDGEWOOD AVE.
200
DAYTONA BEACH, FL 32114

New Principal Place of Business:

227 SEABREEZE BOULEVARD
DAYTONA BEACH, FL 32118

Current Mailing Address:

457 SOUTH RIDGEWOOD AVE.
DAYTONA BEACH, FL 32114

New Mailing Address:

227 SEABREEZE BOULEVARD
DAYTONA BEACH, FL 32118

FEI Number: 27-0090703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAMORE, DAVID R
457 SOUTH RIDGEWOOD AVE.
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

DAMORE, DAVID R
227 SEABREEZE BOULEVARD
DAYTONA BEACH, FL 32118 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: DAVID R. DAMORE

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DAMORE, DAVID R
Address: 457 SOUTH RIDGEWOOD AVE.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: V () Delete
Name: WILLIAMS, ROBERT
Address: 400 EAST GRANT AVE.
City-St-Zip: COCOA BEACH, FL 32931

Title: ST () Delete
Name: HUTH, DENNIS
Address: 6 CLIFFVIEW LANE
City-St-Zip: ORMOND BEACH, FL 32174

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:

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: DAVID R. DAMORE

P

04/29/2009

Electronic Signature of Signing Officer or Director

Date