

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000162971

Entity Name: CONNECTRONICS CORP.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

3000 TAFT ST.
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

3000 TAFT ST.
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-1971140

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENDELSON, VICTOR H ESQ.
825 BRICKELL BAY DR., STE. 1644
MIAMI, FL 33131 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: DT () Delete
Name: IRWIN, THOMAS S
Address: 3000 TAFT ST.
City-St-Zip: HOLLYWOOD, FL 33021

Title: P () Delete
Name: RICKETTS, THOMAS L
Address: 2745 AVONDALE AVE
City-St-Zip: TOLEDO, OH 43607

Title: V () Delete
Name: MOCEK, AL
Address: 2745 AVONDALE AVE
City-St-Zip: TOLEDO, OH 43607

Title: S () Delete
Name: VETTER, JUDITH W
Address: 3000 TAFT ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: AS () Delete
Name: LETENDRE, ELIZABETH
Address: 3000 TAFT ST
City-St-Zip: HOLLYWOOD, FL 33021

Title: VC () Delete
Name: MENDELSON, VICTOR H
Address: 3000 TAFT ST
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: IRWIN, THOMAS S
Address: 3000 TAFT ST.
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: VETTER, JUDITH W
Address: 825 BRICKELL BAY DRIVE #1643
City-St-Zip: MIAMI, FL 33131

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: THOMAS S. IRWIN

T

04/17/2009

Electronic Signature of Signing Officer or Director

Date