

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000013130

Entity Name: STAGEFORCE, INC.

FILED  
Jan 07, 2009  
Secretary of State

## Current Principal Place of Business:

6238 RYDAL CT  
WINDERMERE, FL 34781

## New Principal Place of Business:

## Current Mailing Address:

1744 DERBY GLEN DRIVE  
ATTN: CARL THOMPSON  
ORLANDO, FL 32837

## New Mailing Address:

FEI Number: 51-0566092      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

THOMPSON, CARL  
1744 DERBY GLEN DRIVE  
ORLANDO, FL 32837      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: PTD ( ) Delete  
Name: PRITZ, JONATHAN  
Address: 6238 RYDAL CT  
City-St-Zip: WINDERMERE, FL 34781

Title: V ( ) Delete  
Name: PRITZ, PRISCILA  
Address: 6238 RYDAL GT.  
City-St-Zip: WINDERMERE, FL 34781

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: PRISCILA PRITZ

V

01/07/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date