

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000021882

FILED
Jan 27, 2009
Secretary of State

Entity Name: HIGHBRIDGE SOLUTIONS CORPORATION

Current Principal Place of Business:

3408 MORNING SET CT.
TAMPA, FL 33614

New Principal Place of Business:

3408 MORNING SET CT
TAMPA, FL 33614

Current Mailing Address:

3408 MORNING SET CT.
TAMPA, FL 33614

New Mailing Address:

3408 MORNING SET CT
TAMPA, FL 33614

FEI Number: 20-4361014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FITZGERALD, COLLEEN M ESQ
201 N FRANKLIN ST SUITE 2200
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

TESMER, LAUREL A ESQ
410 S WARE BLVD STE 1031
TAMPA, FL 33616 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: LAUREL TESMER

01/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GURNEY, SCOTT E
Address: 3408 MORNING SET CT.
City-St-Zip: TAMPA, FL 33614

Title: V () Delete
Name: CHAVES, JOAO
Address: 8703 JASMEEN GARDEN CT
City-St-Zip: TAMPA, FL 33615

Title: ST () Delete
Name: TESMER, JOHN G
Address: 1710 W AILEEN ST
City-St-Zip: TAMPA, FL 33607

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: SCOTT E GURNEY

P

01/27/2009

Electronic Signature of Signing Officer or Director

Date