

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000024785

Entity Name: BRICKATHON INC.

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

P. O. BOX 14506
ST. PETERSBURG, FL 337334506

New Principal Place of Business:

P. O. BOX 14506
ST. PETERSBURG, FL 337334506 US

Current Mailing Address:

P. O. BOX 14506
ST. PETERSBURG, FL 337334506

New Mailing Address:

P. O. BOX 14506
ST. PETERSBURG, FL 337334506 US

FEI Number: 20-4325998

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DALE, TRACY
1500 11TH AVE. NORTH
ST. PETERSBURG, FL 33705 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: DALE, TRACY L
Address: P. O. BOX 14506
City-St-Zip: ST. PETERSBURG, FL 337334506

Title: D () Delete
Name: PETRIE, CHRISTINE M
Address: PO BOX 14506
City-St-Zip: SAINT PETERSBURG, FL 337334506

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: TRACY L DALE

PRES

04/17/2009

Electronic Signature of Signing Officer or Director

Date