## 2010 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000073195

**Entity Name: XILED GAMING COMPANY** 

FILED May 03, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7540 WIMPOLE DRIVE

NEW PORT RICHEY, FL 34655

Current Mailing Address: New Mailing Address:

7540 WIMPOLE DRIVE NEW PORT RICHEY, FL 34655

FEI Number: 86-1159347 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KELVER, BENJAMIN D 7540 WIMPOLE DRIVE

NEW PORT RICHEY, FL 34655 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: DF

Name: KELVER, BENJAMIN D
Address: 7540 WIMPOLE DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP

 Name:
 WADE, AARON D

 Address:
 455 ALTERNATE 19 S

 City-St-Zip:
 PALM HARBOR, FL 34683

Title: T

Name: NORDSTROM, JAMES B Address: 1825 N EAST ST. City-St-Zip: WEBB CITY, MO 64870

Title:

Name: ACCORD, MICHAEL J Address: 34943 MEADOW REACH DR. City-St-Zip: ZEPHYRHILLS, FL 33541

Title: M

Name: GOODEN, JAMES P Address: P.O. BOX 605

City-St-Zip: CLEARFIELD, UT 84089

I hereby 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 all other like empowered.

SIGNATURE: BENJAMIN D KELVER DP 05/03/2010