

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104810

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: STELLAR FREEZING SYSTEMS, INC.

## Current Principal Place of Business:

2900 HARTLEY ROAD  
JACKSONVILLE, FL 32257

## New Principal Place of Business:

## Current Mailing Address:

2900 HARTLEY ROAD  
JACKSONVILLE, FL 32257

## New Mailing Address:

FEI Number: 20-5359130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WODRICH, MICHAEL A  
1301 RIVERPLACE BOULEVARD  
SUITE 1500  
JACKSONVILLE, FL 32207 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: P ( ) Delete  
Name: FOSTER, RONALD H JR  
Address: 2900 HARTLY RD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: SVP ( ) Delete  
Name: SANTIRONE, MICHAEL  
Address: 2900 HARTLY RD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: S/T ( ) Delete  
Name: WITT, SCOTT V  
Address: 2900 HARTLEY RD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## 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:

Title: VP ( ) Change (X) Addition  
Name: BOVE, JOSEPH A  
Address: 2900 HARTLEY RD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: VP ( ) Change (X) Addition  
Name: SAPIN, ARMANDO  
Address: 2900 HARTLEY RD  
City-St-Zip: JACKSONVILLE, FL 32257

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 V. WITT

CFO

04/28/2009

Electronic Signature of Signing Officer or Director

Date