

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000118319

Entity Name: CALL LOGIC, INC.

FILED  
Apr 06, 2009  
Secretary of State

## Current Principal Place of Business:

515 E CAREFREE HIGHWAY  
#835  
PHOENIX, AZ 85085 US

## New Principal Place of Business:

## Current Mailing Address:

3956 TOWN CENTER BLVD  
#290  
ORLANDO, FL 32837 US

## New Mailing Address:

515 E CAREFREE HIGHWAY  
#835  
PHOENIX, AZ 85085 US

FEI Number: 20-5544864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: VP&D ( ) Delete  
Name: ENCK, GLEN  
Address: 726 INDIANA AVENUE  
City-St-Zip: LEMOYNE, PA 17043 US

Title: VP&D ( ) Delete  
Name: BALDWIN, WILLIAM  
Address: 7913 NW 11TH CT  
City-St-Zip: VANCOUVER, WA 98664 US

Title: VP&D ( ) Delete  
Name: WILSON, NATHAN  
Address: 515 E CAREFREE HIGHWAY #835  
City-St-Zip: PHOENIX, AZ 85085 US

## 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: NATHAN D. WILSON

GM

04/06/2009

Electronic Signature of Signing Officer or Director

Date