

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000139918

**FILED**  
**Apr 07, 2009**  
**Secretary of State**

**Entity Name:** MOONLIGHT TECHNOLOGY, INC.

**Current Principal Place of Business:**

1000 MORNINGSIDE DRIVE  
NAPLES, FL 341033344 US

**New Principal Place of Business:**

**Current Mailing Address:**

1000 MORNINGSIDE DRIVE  
NAPLES, FL 341033344 US

**New Mailing Address:**

**FEI Number:** 56-2623946

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLANCO, ROSE MARIA C  
100 MORNINGSIDE DRIVE  
NAPLES, FL 341033344 US

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

CABRERA BLANCO, ROSA MARIA  
100 MORNINGSIDE DRIVE  
NAPLES, FL 341033344 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: RC

04/07/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BLANCO, ROSA MARIA  
Address: 100 MORNINGSIDE DRIVE  
City-St-Zip: NAPLES, FL 341033344

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: CABRERA BLANCO, ROSA MARIA  
Address: 100 MORNINGSIDE DRIVE  
City-St-Zip: NAPLES, FL 341033344

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: RC

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date