2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000151752

Entity Name: ELEPHANTBRAIN, INC.

City-St-Zip:

SEMINOLE, FL 33772

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
4 HARGROVE GRADE			5 UTILITY DRIVE	5 UTILITY DRIVE	
UNIT F			SUITE 3		
PALM COAST, FL 32137			PALIVI COAST, FL	PALM COAST, FL 32137	
Current Mailing Address:			New Mailing Add	New Mailing Address:	
4 HARGROVE GRADE			5 UTILITY DRIVE		
UNIT F PALM COAST, FL 32137			SUITE 3	SUITE 3 PALM COAST, FL 32137	
'		FEI Number Not Applicable ()			
r El Nullibel.	. 20-0020029	rendinber Applied For ()	r El Nambel Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addres	Name and Address of New Registered Agent:	
WINGEIEF	R, ALEXANDEI	RW			
9422 TARA CAY CT. SEMINOLE, FL 33776 US					
SEMINOLE	E, FL 33776	US			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its regist	ered office or registered agent, or both,	
SIGNATUF	RE:				
		nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financing	g Trust Fund Contribution ().			
OFFICER:	S AND DIREC	TORS:	ADDITIONS/CHAI	NGES TO OFFICERS AND DIRECTORS	
Title:	P, T ()) Delete	Title:	() Change () Addition	
Name:	WINGEIER, ÀL		Name:	• • • • • • • • • • • • • • • • • • • •	
Address:	9422 TARA CA		Address:		
City-St-Zip:	SEMINOLE, FL	337/6	City-St-Zip:		
Title:	VP ()) Delete	Title:	() Change () Addition	
Name:	WOJCIECHOW	· ·	Name:		
Address: City-St-Zip:	4950 POINTE O OLDSMAR, FL		Address: City-St-Zip:		
•	,				
Title:	, ,) Delete	Title:	() Change () Addition	
Name: KERIN, ERIC A Address: 8015 125TH ST		Name: Address:			

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.

City-St-Zip:

SIGNATURE: ALEXANDER W WINGEIER P, T 04/30/2009