

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000152691

Entity Name: APJOY, INC.

FILED  
Jan 26, 2009  
Secretary of State

## Current Principal Place of Business:

13149 N. DALE MABRY  
SUITE D  
TAMPA, FL 33618

## New Principal Place of Business:

## Current Mailing Address:

13149 N. DALE MABRY  
SUITE D  
TAMPA, FL 33618

## New Mailing Address:

FEI Number: 43-2116021

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

VRASPIR, TODD W  
5327 COMMERCIAL WAY  
SUITE A101  
SPRING HILL, FL 34606 US

## Name and Address of New Registered Agent:

JOYCE, PANAPA  
13149 N. DALE MABRY  
SUITE D  
TAMPA, FL 33618 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: JOYCE PANAPA

01/26/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P D ( ) Delete  
Name: PANAPA, JOYCE  
Address: 13149 N. DALE MABRY - SUITE D  
City-St-Zip: TAMPA, FL 33618

Title: VP D ( ) Delete  
Name: OLIVAS, APRIL  
Address: 13149 N. DALE MABRY - SUITE D  
City-St-Zip: TAMPA, FL 33618

Title: T ( ) Delete  
Name: OLIVAS, APRIL  
Address: 13149 N. DALE MABRY - SUITE D  
City-St-Zip: TAMPA, FL 33618

Title: S ( ) Delete  
Name: PANAPA, JOYCE  
Address: 13149 N. DALE MABRY - SUITE D  
City-St-Zip: TAMPA, FL 33618

## 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: ( ) 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: JOYCE PANAPA

P D

01/26/2009

Electronic Signature of Signing Officer or Director

Date