

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000000669

FILED  
Apr 25, 2009  
Secretary of State

Entity Name: WIRED TECHNOLOGIES GROUP, INC.

**Current Principal Place of Business:**

654 HOME GROVE DR  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

4110 SR 535  
SUITE 120  
WINTER GARDEN, FL 34787

**Current Mailing Address:**

654 HOME GROVE DR  
WINTER GARDEN, FL 34787

**New Mailing Address:**

4110 SR 535  
SUITE 120  
WINTER GARDEN, FL 34787

FEI Number: 20-8109095

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 DR 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: VPTD ( ) Delete  
Name: HOMAN, JEFFREY J  
Address: 142 SOUTHERN PECAN CIRCLE UNIT 108  
City-St-Zip: WINTER GARDEN, FL 34787

Title: PD ( ) Delete  
Name: LANG, ERIC R  
Address: 654 HOME GROVE DR  
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD ( ) Delete  
Name: FUSSELL, BRANNON G  
Address: 204 VERBENA DR  
City-St-Zip: ORLANDO, FL 32807

**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: JEFFREY J HOMAN

VPTD

04/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date