2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000023321

Entity Name: MEMORY BRIDGING INCORPORATED

FILED Jun 16, 2009 Secretary of State

y	MICE WILMOR	BRIBOING INCORT CIVITE			
Current P	rincipal Place	of Business:	New Principal Pl	New Principal Place of Business:	
3600 PRE: DESTIN, F	SERVE LANE FL 32550		SUITE 201	141 MACK BAYOU LOOP SUITE 201 SANTA ROSA BEACH, FL 32459	
Current M	lailing Addres	ss:	New Mailing Add	New Mailing Address:	
3600 PRESERVE LANE DESTIN, FL 32550			SUITE 201	141 MACK BAYOU LOOP SUITE 201 SANTA ROSA BEACH, FL 32459	
FEI Number	: 20-8683861	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
BARONE, STEVEN 3600 PRESERVE LANE DESTIN, FL 32550 US			141 MACK BAYO SUITE 201	BARONE, STEVEN 141 MACK BAYOU LOOP SUITE 201 SANTA ROSA BEACH, FL 32459 US	
The above in the State	named entity : e of Florida.	submits this statement for the	ourpose of changing its regis	stered office or registered agent, or both,	
SIGNATURE: STEVEN M. BARONE				06/16/2009	
	Electror	nic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did no	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	CEO () BARONE, STEV 3600 PRESERV DESTIN, FL 32	VE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () BARONE, STEV 3600 PRESER' DESTIN, FL 32	VE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DIR () KOSTELNIK, D 22212 CHIPPE GOLDEN, CO	WA LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DIR () WATSON, RICI) Delete < VP	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: STEVEN M. BARONE CEO 06/16/2009

16154 ROCK CRYSTAL DRIVE

PARKER, CO 80134

Address:

City-St-Zip: