2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000058893

Entity Name: ULTROID TECHNOLOGIES, INC.

FILED Mar 10, 2009 Secretary of State

Current Princip	al Place of Business:	New Princip	al Place of Business

405 CENTRAL AVE, 780 CARILLON PARKWAY

SUITE 100 SUITE 240

ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33716

Current Mailing Address: New Mailing Address:

405 CENTRAL AVE, 780 CARILLON PARKWAY

SUITE 100 SUITE 240

ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33716

FEI Number: 32-0125319 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CAO, MICHAEL H

405 CENTRAL AVE, SUITE 100

780 CARILLON PARKWAY

ST. PETERSBURG, FL 33701 US SUITE 240 ST. PETERSBURG, FL 33716 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: MICHAEL KNOX 03/10/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D () Delete
 Title:
 CEO (X) Change () Addition

 Name:
 COA, MICHAEL H
 Name:
 WILLIS, BRENT D

 Address:
 405 CENTRAL AVE, SUITE 100
 Address:
 780 CARILLON PARKWAY

Address: 405 CENTRAL AVE, SUITE 100 Address: 780 CARILLON PARKWAY
City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: ST. PETERSBURG, FL 33716

Title: CFO () Delete Title: CFO (X) Change () Addition Name: KNOX, MICHAEL A Name: KNOX, MICHAEL A

Address: 405 CENTRAL AVE, SUITE 100 Address: 780 CARILLON PARKWAY
City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: ST. PETERSBURG, FL 33716

Title: CAO (X) Delete Title: () Change () Addition

 Name:
 SPURGIN, GERALD
 Name:

 Address:
 405 CENTRAL AVE, SUITE 100
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33701
 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: MICHAEL KNOX CFO 03/10/2009