2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079691

Entity Name: POWER PURCHASING, INC.

FILED Apr 28, 2009 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
1217 E. CAPE CORAL PARKWAY, STE 90 CAPE CORAL, FL 33904				1217 E. CAPE CORAL PARKWAY STE 90 CAPE CORAL, FL 33904			
Current Mailing Address:				New Mailing Address:			
1217 E. CAPE CORAL PARKWAY, STE 90 CAPE CORAL, FL 33904				1217 E. CAPE CORAL PARKWAY STE 90 CAPE CORAL, FL 33904			
FEI Number	: 90-0334842	FEI Number Applied For ()	FEI Num	ber Not Appl	icable ()	Certificate of Status Desired (X)	
Name and	d Address of C	urrent Registered Agent:		Name and	Address	of New Registered Agent:	
MARKS, DONNA 1217 E. CAPE CORAL PARKWAY, STE 90 CAPE CORAL, FL 33904 US				MARKS, DONNA 1217 E. CAPE CORAL PARKWAY STE 90 CAPE CORAL, FL 33904 US			
	e named entity : e of Florida.	submits this statement for the	purpose of	changing i	ts register	ed office or registered agent, or both,	
SIGNATURE:				04/28/2009			
	Electror	ic Signature of Registered Ag	jent			Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	P/D () MARKS, DONN 4106 NW 11TH CAPE CORAL,	TERRACE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T () MARKS, DONN 4106 NW 11TH CAPE CORAL,	TERRACE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP/D () MARKS, SALVO 4106 NW 11TH CAPE CORAL,	TERRACE		Title: Name: Address: City-St-Zip:		(X) Change()Addition SHLEY 11TH TERRACE RAL, FL 33993	
Title: Name: Address: City-St-Zip:	S/D () MARKS, ASHLE 4106 NW 11TH CAPE CORAL,	TERRACE		Title: Name: Address: City-St-Zip:		() 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.