

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000110395

Entity Name: BULLETCASTER INC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

3075 HAMMOCK RD
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

P.O.BOX 321
MIMS, FL 32754

New Mailing Address:

FEI Number: 29-1186812

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KROMPEGAL, WILLIAM
3075 HAMMOCK RD
MIMS, FL 32754 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: D/P () Delete
Name: WHITEHEAD, TERREE
Address: 3005 HIDDEN LAKE DR
City-St-Zip: DULUTH, GA 30096

Title: D/S () Delete
Name: KROMPEGAL, WILLIAM
Address: 3075 HAMMOCK RD
City-St-Zip: MIMS, FL 32754

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WILLIAM KROMPEGAL

SEC

04/30/2009

Electronic Signature of Signing Officer or Director

Date