

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000134153

Entity Name: VERTICALS BY NOON, INC

FILED
Mar 22, 2009
Secretary of State

Current Principal Place of Business:

1640 PATLIN CIRCLE S
LARGO, FL 33770 US

New Principal Place of Business:

3200 EAST BAY DR
SUITE A
LARGO, FL 33771 US

Current Mailing Address:

1640 PATLIN CIRCLE S
LARGO, FL 33770 US

New Mailing Address:

3200 EAST BAY DR
SUITE A
LARGO, FL 33771 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYKSTRA, WILLIAM
619 HIGHLAND AVE NE
LARGO, FL 33770 US

Name and Address of New Registered Agent:

DYKSTRA, WILLIAM
310 WEST BAY DR
LARGO, FL 33770 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: WILLIAM DYKSTRA

03/22/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P,T () Delete
Name: NOON, DAVID L
Address: 1640 PATLIN CIRCLE S
City-St-Zip: LARGO, FL 33770 US

Title: VP,S () Delete
Name: NOON, SHERRY L
Address: 1640 PATLIN CIRCLE S
City-St-Zip: LARGO, FL 33770 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NOON, DAVID L
Address: 1640 PATLIN CIRCLE S
City-St-Zip: LARGO, FL 33770 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: MIRIAM, NOON J TRES
Address: 1820 PATLIN CIRCLE S
City-St-Zip: LARGO, FL 33770

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: DAVID L. NOON

PRES

03/22/2009

Electronic Signature of Signing Officer or Director

Date