

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000018617

Entity Name: VYKIN CORPORATION

FILED  
Apr 22, 2010  
Secretary of State

## Current Principal Place of Business:

301 W. PLATT ST.  
#401  
TAMPA, FL 33606

## New Principal Place of Business:

400 N. ASHLEY DR.  
SUITE 1440  
TAMPA, FL 33602

## Current Mailing Address:

301 W. PLATT ST.  
#401  
TAMPA, FL 33606

## New Mailing Address:

400 N. ASHLEY DR.  
SUITE 1440  
TAMPA, FL 33602

FEI Number: 80-0151437

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIDER, LEISHA R  
301 W. PLATT ST.  
#401  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

RIDER, LEISHA R  
400 N. ASHLEY DR.  
SUITE 1440  
TAMPA, FL 33602 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:

04/22/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VP/D  
Name: RIDER, TIMOTHY J  
Address: 400 N. ASHLEY DR., SUITE 1440  
City-St-Zip: TAMPA, FL 33602

Title: T/D  
Name: BACHL, EDWARD A  
Address: 400 N. ASHLEY DR., SUITE 1440  
City-St-Zip: TAMPA, FL 33602

Title: P/D  
Name: RIDER, LEISHA R  
Address: 400 N. ASHLEY DR., SUITE 1440  
City-St-Zip: TAMPA, FL 33602

Title: S/D  
Name: GREENE, BRIAN E  
Address: 400 N. ASHLEY DR., SUITE 1440  
City-St-Zip: TAMPA, FL 33602

I hereby 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 all other like empowered.

SIGNATURE: LEISHA RIDER

PRES

04/22/2010

Electronic Signature of Signing Officer or Director

Date