

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000027101

Entity Name: ALLIED SIMULATION, INC.

FILED  
Mar 29, 2010  
Secretary of State

## Current Principal Place of Business:

2704 WINDSORGATE LANE  
ORLANDO, FL 32828 US

## New Principal Place of Business:

1410 N GOLDENROD RD  
STE 4  
ORLANDO, FL 32807 US

## Current Mailing Address:

2704 WINDSORGATE LANE  
ORLANDO, FL 32828 US

## New Mailing Address:

1410 N GOLDENROD RD  
STE 4  
ORLANDO, FL 32807 US

FEI Number: 26-2160060

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRODA, TIFFANY D  
1137 SOPHIE BLVD  
ORLANDO, FL FL US

## Name and Address of New Registered Agent:

BRODA, TIFFANY D  
1137 SOPHIE BLVD  
ORLANDO, FL 32828 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: TIFFANY BRODA

03/29/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: PONDER, MICHAEL L  
Address: 1410 N GOLDENROD RD STE 4  
City-St-Zip: ORLANDO, FL 32807 US

Title: VP  
Name: ROLLS, MARTYN J  
Address: 1410 N GOLDENROD RD STE 4  
City-St-Zip: ORLANDO, FL 32807 US

Title: S  
Name: BRODA, TIFFANY D  
Address: 1410 N GOLDENROD RD STE 4  
City-St-Zip: ORLANDO, FL 32807 US

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: TIFFANY BRODA

S

03/29/2010

Electronic Signature of Signing Officer or Director

Date