2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P08000085286

Entity Name: SILVERBACK COURIER, INC.

Current Principal Place of Business:

8212 PAMLICO ST.
ORLANDO, FL 32817 US

New Principal Place of Business:

2660 AMAYA TERRACE
LAKE MARY, FL 32746 US

Current Mailing Address:

8212 PAMLICO ST.
ORLANDO, FL 32817 US

New Mailing Address:

P.O. BOX 677114
ORLANDO, FL 32867 US

FEI Number: 26-3373579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BAKER, ANDREA
8212 PAMLICO ST.
ORLANDO, FL 32817 US

Name and Address of New Registered Agent:

WALTERS, JAMES E
2660 AMAYA TERRACE
LAKE MARY, FL 32746 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: JAMES E. WALTERS 04/30/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: BAKER, ANDREA
Address: 8212 PAMLICO ST.
City-St-Zip: ORLANDO, FL 32817 US

Title: VD ( ) Delete
Name: WALTERS, JAMES
Address: 626 SHERWOOD DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: SD (X) Delete
Name: WALTERS, TRACY
Address: 626 SHERWOOD DR
City-St-Zip: ALTAMONTE SPRINGS, FL 32701 US

Title: TD (X) Delete
Name: BAKER, DAVID
Address: 8212 PAMLICO ST.
City-St-Zip: ORLANDO, FL 32817 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: WALTERS, JAMES E
Address: 2660 AMAYA TERRACE
City-St-Zip: LAKE MARY, FL 32746 US

Title: TD (X) Change ( ) Addition
Name: WA;TERS, TRACY M
Address: 2660 AMAYA TERRACE
City-St-Zip: LAKE MARY, FL 32746 US

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: JAMES E. WALTERS PD 04/30/2009
Electronic Signature of Signing Officer or Director Date