## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000092174

Entity Name: KOPFJAGER, INC

City-St-Zip:

FILED Apr 16, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 709 CAPE CORAL PARKWAY WEST CAPE CORAL, FL 33914 **Current Mailing Address: New Mailing Address:** 709 CAPE CORAL PARKWAY WEST CAPE CORAL, FL 33914 FEI Number: 26-3450757 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SWAN, LAWRENCE 14250 ROYAL HARBOUR CT UNIT 517 FT MYERS, FL 33908 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition ORNELAS, VICTORIANO H Name: Name: 709 CAPE CORAL PARKWAY WEST Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: Title: VSTD () Delete Title: () Change () Addition Name: OMELAS, VICTORIANO H Name: 709 CAPE CORAL PARKWAY WEST Address: Address: CAPE CORAL, FL 33914

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: VICTORIANO ORNELAS PD 04/16/2009