

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000099035

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: TOUCH RATE, INC.

## Current Principal Place of Business:

2471 ALOMA AVENUE  
SUITE 101  
WINTER PARK, FL 32792 US

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 3537  
WINTER PARK, FL 32792 US

## New Mailing Address:

PO BOX 3537  
WINTER PARK, FL 32790 US

FEI Number: 26-3715152      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

THE ROY LAW FIRM, PL  
411 W. CENTRAL PARKWAY  
ALTAMONTE SPRINGS, FL 32714 US

## Name and Address of New Registered Agent:

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:

Title: PST ( ) Delete  
Name: HILMER, WAYNE J  
Address: POST OFFICE BOX 3537  
City-St-Zip: WINTER PARK, FL 32792 US

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST (X) Change ( ) Addition  
Name: HILMER, WAYNE J  
Address: PO BOX 3537  
City-St-Zip: WINTER PARK, FL 32790 US

Title: VPST ( ) Change (X) Addition  
Name: JENKINS, JILL M  
Address: PO BOX 3537  
City-St-Zip: WINTER PARK, FL 32790

Title: TRSR ( ) Change (X) Addition  
Name: JENKINS, JILL M  
Address: PO BOX 3537  
City-St-Zip: WINTER PARK, FL 32790

Title: SCTY ( ) Change (X) Addition  
Name: JENKINS, JILL M  
Address: PO BOX 3537  
City-St-Zip: WINTER PARK, FL 32790

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: JILL M. JENKINS

VPST

04/16/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date