

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000109876

FILED
Jan 08, 2010
Secretary of State

Entity Name: VIRGIL INC.

Current Principal Place of Business:

37434 CLINTON AVE
DADE CITY, FL 33525

New Principal Place of Business:

38008 LIVE OAK AVE
SUITE #7
DADE CITY, FL 33523

Current Mailing Address:

P.O. BOX 2338
DADE CITY, FL 33526 US

New Mailing Address:

PO BOX 2338
DADE CITY, FL 33526 US

FEI Number: 30-0520268

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CHIPMAN, MARGIT
37434 CLINTON AVE
DADE CITY, FL 33525 US

Name and Address of New Registered Agent:

CHIPMAN, MARGIT
38008 LIVE OAK AVE
SUITE #7
DADE CITY, FL 33523 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: MARGIT CHIPMAN

01/08/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: CHIPMAN, MARGIT
Address: 37434 CLINTON AVE
City-St-Zip: DADE CITY, FL 33525 US

Title: T
Name: CHIPMAN, HAROLD N
Address: 37434 CLINTON AVE
City-St-Zip: DADE CITY, FL 33525 US

Title: S
Name: CHIPMAN, HAROLD N
Address: 37434 CLINTON AVE
City-St-Zip: DADE CITY, FL 33525 US

Title: D
Name: CHIPMAN, MARGIT
Address: 37434 CLINTON AVE
City-St-Zip: DADE CITY, FL 33525 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: MARGIT CHIPMAN

MRS.

01/08/2010

Electronic Signature of Signing Officer or Director

Date