

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000044433

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** COHESION5 TECHNOLOGIES, INC.

**Current Principal Place of Business:**

8732 LOST COVE DRIVE  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

7512 DR. PHILLIPS BLVD.  
# 50-924  
ORLANDO, FL 32819 US

**New Mailing Address:**

**FEI Number:** 27-2379332

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOGAN, PAUL D  
2711 CARTER GROVE CIRCLE  
WINDERMERE, FL 34786 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:** P  
**Name:** JUDITH, MICHAEL A  
**Address:** 8732 LOST COVE DRIVE  
**City-St-Zip:** ORLANDO, FL 32819 US

**Title:** SEC  
**Name:** LOGAN, PAUL D  
**Address:** 2711 CARTER GROVE CIRCLE  
**City-St-Zip:** WINDERMERE, FL 34786 US

**Title:** DIR  
**Name:** JUDITH, MICHAEL A  
**Address:** 8732 LOST COVE DRIVE  
**City-St-Zip:** ORLANDO, FL 32819 US

**Title:** DIR  
**Name:** LOGAN, PAUL D  
**Address:** 2711 CARTER GROVE CIRCLE  
**City-St-Zip:** WINDERMERE, FL 34786 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:** PAUL D LOGAN

SEC

04/30/2010

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

\_\_\_\_\_  
Date