

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000062868

FILED  
Jul 09, 2010  
Secretary of State

Entity Name: ANCHOR BLUE, INC.

**Current Principal Place of Business:**

5200 TOWN CENTER CIRCLE SUITE 600  
BOCA RATON, FL 33486

**New Principal Place of Business:**

1260 CORONA POINTE COURT  
CORONA, CA 92879

**Current Mailing Address:**

5200 TOWN CENTER CIRCLE SUITE 600  
BOCA RATON, FL 33486

**New Mailing Address:**

1260 CORONA POINTE COURT  
CORONA, CA 92879

FEI Number: 27-0659916

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: POLAZZI, ANTHONY  
Address: 5200 TOWN CENTER CIRCLE SUITE 600  
City-St-Zip: BOCA RATON, FL 33486

Title: D  
Name: KING, T. SCOTT  
Address: 5200 TOWN CENTER CIRCLE, STE. 600  
City-St-Zip: BOCA RATON, FL 33486

Title: PRES  
Name: SANDS, THOMAS  
Address: 1260 CORONA POINTE COURT  
City-St-Zip: CORONA, CA 92879

Title: SEC  
Name: GREGG, ELANIE  
Address: 1260 CORONA POINTE COURT  
City-St-Zip: CORONA, CA 92879

Title: CFO  
Name: SHAW, THOMAS  
Address: 1260 CORONA POINTE COURT  
City-St-Zip: CORONA, CA 92879

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: THOMAS SHAW

CFO

07/09/2010

Electronic Signature of Signing Officer or Director

Date