

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P27973

FILED
Apr 03, 2009
Secretary of State

Entity Name: PLASMINE TECHNOLOGY, INC.

Current Principal Place of Business:

3298 SUMMIT BOULEVARD
BUILDING 35
PENSACOLA, FL 32503 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 30209
PENSACOLA, FL 325031209 US

New Mailing Address:

FEI Number: 59-2982267 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: EMERSON, RALPH,
Address: 3976 MENENDEZ DRIVE
City-St-Zip: PENSACOLA, FL 32503

Title: D () Delete
Name: VAUGHAN, JOHN,
Address: 307 ELDREDGE ROAD
City-St-Zip: FT. WALTON BEACH, FL 32547

Title: ST () Delete
Name: SPENCER, WILLIAM H
Address: 5740 COUNTRY SQUIRE DRIVE
City-St-Zip: MILTON, FL 32570

Title: D () Delete
Name: KATAYAMA, MIKIO
Address: 509 PRESTON PARK DRIVE
City-St-Zip: DULUTH, GA 30096

Title: PD () Delete
Name: VIOLETTE, STEVEN J
Address: 1172 MARY KATE DRIVE
City-St-Zip: GULF BREEZE, FL 32561

Title: D () Delete
Name: MORRIS, CHARLES W
Address: 85316 AVANT ROAD
City-St-Zip: YULEE, FL 32096

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: WILLIAM H. SPENCER III

CFO

04/03/2009

Electronic Signature of Signing Officer or Director

_____ Date