

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000065099

Entity Name: INTELLEX ENTERPRISES, INC.

FILED
Feb 01, 2008
Secretary of State

Current Principal Place of Business:

3802 EHRLICH ROAD SUITE 204
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

3802 EHRLICH ROAD SUITE 204
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-3267613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, JUDY
3802 EHRLICH ROAD SUITE 204
TAMPA, FL 33624 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: STACHOW, PAUL
Address: 4354 OUTRIGGER LANE
City-St-Zip: TAMPA, FL

Title: CP () Delete
Name: JOHNSON, JUDY
Address: 11201 N 56TH STREET
City-St-Zip: TAMPA, FL 33617

Title: D (X) Delete
Name: GORDON, JANE
Address: 5162 TENNIS CT. CIRCLE
City-St-Zip: TAMPA, FL

Title: D (X) Delete
Name: HARPER, ALICE
Address: 11201 N 56TH STREET
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CP (X) Change () Addition
Name: JOHNSON, JUDY A DR
Address: 11201 N 56TH STREET
City-St-Zip: TAMPA, FL 33617

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: DR JUDY JOHNSON

CP

02/01/2008

Electronic Signature of Signing Officer or Director

Date