2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2009
Secretary of State

DOCUMENT# P95000052222

Entity Name: BUSINESS TECHNOLOGY GROUP, INC.

Current Principal Place of Business:

7800 BELFORT PKWY
SUITE 290
JACKSONVILLE, FL 32256 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 57487
JACKSONVILLE, FL 322417487 US

New Mailing Address:

7800 BELFORT PKWY
SUITE 290
JACKSONVILLE, FL 32256 US

FEI Number: 59-3327860 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HERNANDEZ, MEREDITH A
3617 CROWN POINT ROAD
SUITE # 2
JACKSONVILLE, FL 32257 US

Name and Address of New Registered Agent:

NELSON, TODD
7800 BELFORT PARKWAY
SUITE 290
JACKSONVILLE, FL 32256 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: TODD NELSON 05/08/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: POWERS, GAYLON K
Address: PO BOX 57487
City-St-Zip: JACKSONVILLE, FL 32241

Title: D ( ) Delete
Name: NELSON, TODD C
Address: PO BOX 57487
City-St-Zip: JACKSONVILLE, FL 32241

Title: D ( ) Delete
Name: FOLEY, BRET S
Address: PO BOX 57487
City-St-Zip: JACKSONVILLE, FL 32241

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: POWERS, GAYLON K
Address: 7800 BELFORT PARKWAY, SUITE 290
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change ( ) Addition
Name: NELSON, TODD C
Address: 7800 BELFORT PARKWAY, SUITE 290
City-St-Zip: JACKSONVILLE, FL 32256

Title: D (X) Change ( ) Addition
Name: FOLEY, BRET S
Address: 7800 BELFORT PARKWAY, SUITE 290
City-St-Zip: JACKSONVILLE, FL 32256

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: TODD NELSON D 05/08/2009
Electronic Signature of Signing Officer or Director Date