

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 25, 2008 8:00 am
Secretary of State

08-25-2008 90005 025 ***150.00

DOCUMENT # P95000071485

1. Entity Name
MAGLEV 2000 OF FLORIDA CORPORATION



Principal Place of Business
**6855 TICO ROAD
TITUSVILLE, FL 32780 US**

Mailing Address
**9 HANCOCK ST
C/O T.R. WAGNER
LAGUNA NIGUEL, CA 92677**

40114327



2. Principal Place of Business - No P.O. Box #
5145 Bridge Road

3. Mailing Address

08182008 Chg-P CR2E034 (12/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number
65-0655240

Applied For
Not Applied

City & State
Cocoa, Florida

City & State

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

Zip
32927

Country
USA

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	DANBY, GORDON	
STREET ADDRESS	126 SOUND ROAD	
CITY-ST-ZIP	WADING RIVER, NY 11792	
TITLE	D	<input type="checkbox"/> Delete
NAME	POWELL, JAMES DR.	
STREET ADDRESS	9 SOUNDVIEW DRIVE	
CITY-ST-ZIP	SHOREHAM, NY	
TITLE	D	<input type="checkbox"/> Delete
NAME	MORENA, JOHN	
STREET ADDRESS	1907 ALTO STREET	
CITY-ST-ZIP	WEST BABYLON, NY 11704	
TITLE	PD	<input type="checkbox"/> Delete
NAME	WAGNER, THOMAS R	
STREET ADDRESS	9 HANCOCK ST	
CITY-ST-ZIP	LAGUNA NIGUEL, CA 92677	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas Wagner, President*