

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000071485

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: MAGLEV 2000 OF FLORIDA CORPORATION

## Current Principal Place of Business:

5145 BRIDGE ROAD  
COCOA, FL 32927 US

## New Principal Place of Business:

## Current Mailing Address:

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

## New Mailing Address:

500 STATE COLLEGE BLVD.  
SUITE 1200 C/O T.R. WAGNER  
ORANGE, CA 92868

FEI Number: 65-0655240

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DANBY, GORDON  
Address: 126 SOUND ROAD  
City-St-Zip: WADING RIVER, NY 11792

Title: D ( ) Delete  
Name: POWELL, JAMES DR.  
Address: 9 SOUNDVIEW DRIVE  
City-St-Zip: SHOREHAM, NY

Title: D ( ) Delete  
Name: MORENA, JOHN  
Address: 1907 ALTO STREET  
City-St-Zip: WEST BABYLON, NY 11704

Title: PD ( ) Delete  
Name: WAGNER, THOMAS R  
Address: 9 HANCOCK ST  
City-St-Zip: LAGUNA NIGUEL, CA 92677

## 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  
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: THOMAS WAGNER

PRES

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date