

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000069535

FILED
Jan 30, 2009
Secretary of State

Entity Name: X-58, INC.

Current Principal Place of Business:

13301 SW CITRUS BLVD
INDIANTOWN, FL 34956 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1234
INDIANTOWN, FL 349561234 US

New Mailing Address:

FEI Number: 65-0776940

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PICKEN, GREGORY C
701 US #1, STE 402
N PALM BCH, FL 33408 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: PD () Delete
Name: DAWSON, CLYDE
Address: 13501 SOUTHWEST CITRUS BOULEVARD
City-St-Zip: INDIANTOWN, FL 34956

Title: ST () Delete
Name: DAWSON, NANCY
Address: 13501 SOUTHWEST CITRUS BOULEVARD
City-St-Zip: INDIANTOWN, FL 34956

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CLYDE W. DAWSON

PD

01/30/2009

Electronic Signature of Signing Officer or Director

_____ Date