

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000016690

Entity Name: POWDER RIVER CORPORATION

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

9532 OAK HOLLOW TRAIL
TALLAHASSEE, FL 32309 US

New Principal Place of Business:

Current Mailing Address:

C/O A. GAYNOR 9532 OAK HOLLOW TRAIL
TALLAHASSEE, FL 32309 US

New Mailing Address:

FEI Number: 65-0546857 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MAYNE, JOEL H
5650 SE LAMAY DRIVE
STUART, FL 349976548 US

Name and Address of New Registered Agent:

MAYNE II, JOEL H
5650 SE LAMAY DRIVE
STUART, FL 349976548 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: JOEL H. MAYNE II

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MAYNE, JOEL H II
Address: 5650 SE LAMAY DRIVE
City-St-Zip: STUART, FL 34997 US

Title: DVP () Delete
Name: HALVIN, ANNE L
Address: 9532 OAK HOLLOW TR.
City-St-Zip: TALLAHASSEE, FL 32309 US

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: JOEL H. MAYNE II

P/D

04/24/2009

Electronic Signature of Signing Officer or Director

Date