

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000033293

Entity Name: EXHIBITION LOGISTICS, INC.

FILED
Apr 23, 2009
Secretary of State

Current Principal Place of Business:

2424 ORLANDO CENTRAL PKWY
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

215 NORTH EOLA DRIVE
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 58-2386064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOCTOR, JAMES J
215 NORTH EOLA DRIVE
ORLANDO, FL 32801 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: DPS () Delete
Name: LEWIS, JAMES B
Address: 2424 ORLAND CENTRAL PKWY
City-St-Zip: ORLANDO, FL 32809

Title: DVT () Delete
Name: MCCALLUM, GARY R
Address: 2424 ORLANDO CENTRAL PKWY
City-St-Zip: ORLANDO, FL 32809

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: JAMES LEWIS

DPS

04/23/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date