

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000062707

FILED
Jan 13, 2009
Secretary of State

Entity Name: AEGEAN FIXED INCOME CORPORATION

Current Principal Place of Business:

927 E NEW HAVEN AVE
STE 315
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

927 E NEW HAVEN AVE
STE 315
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-3592144 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYER, CHRISTOPHER P
839 E NEW HAVEN AVE
MELBOURNE, FL 32901 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: FAKATSELIS, JOHN C
Address: 394 LANTERNBACK ISLAND DR
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete
Name: FAKATSELIS, GEORGE
Address: 2802 GRANITE AVE
City-St-Zip: SACHSE, TX 75048

Title: D () Delete
Name: MYER, CHRIS
Address: 393 PIRIT ST NE
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: TRICAS, TIM
Address: 3277 BEAUMONT WOODS PL
City-St-Zip: HONOLULU, HI 96822

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: JOHN FAKATSELIS

D

01/13/2009

Electronic Signature of Signing Officer or Director

Date