

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000070745

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: TELOS LABS, INC.

**Current Principal Place of Business:**

6306 NEWTOWN CIR., #A-2  
TAMPA, FL 33615

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 260502  
TAMPA, FL 33685

**New Mailing Address:**

FEI Number: 59-3602744      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

TORTORELLO, JOHN V  
4822 BONITA VISTA DRIVE  
TAMPA, FL 33634 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: TSATAROS, EDDIE J  
Address: 6306 NEWTOWN CIR., #A2  
City-St-Zip: TAMPA, FL 33615

Title: D      ( ) Delete  
Name: TSATAROS, JOHN  
Address: 410 W. KLOSTERMAN RD.  
City-St-Zip: PALM HARBOR, FL 34683

Title: D      ( ) Delete  
Name: LOPEZ, WALTER M JR.  
Address: 3800 BAY TO BAY BLVD., STE. 11  
City-St-Zip: TAMPA, FL 33629

Title: V      ( ) Delete  
Name: TORTORELLO, JOHN V  
Address: 4822 BONITA VISTA DR.  
City-St-Zip: TAMPA, FL 33634

**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 V TORTORELLO VP

V

04/29/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date