2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# S77138

Entity Name: ADRENALINE FILM PRODUCTIONS, INC.

Current Principal Place of Business:

5224 S. ORANGE AVE.
ORLANDO, FL 37809

New Principal Place of Business:

Current Mailing Address:

5224 S. ORANGE AVE.
ORLANDO, FL 37809

New Mailing Address:

FEI Number: 59-3081124 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WENTZ, DEBORAH
5224 S ORANGE AVE
ORLANDO, FL 32809 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: VP ( ) Delete
Name: MCALEENAN, MICHAEL S, .
Address: 1250 HOBSON STR
City-St-Zip: LONGWOOD, FL

Title: S ( ) Delete
Name: ADKISON, LEE
Address: 6435 BREAKWATER DRIVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: PCEO ( ) Delete
Name: MURRAY, MICHAEL T
Address: 8 PERRY LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP ( ) Delete
Name: BROUGHMAN, MARY
Address: 3004 CHELSEA ST
City-St-Zip: ORLANDO, FL 32803

Title: T ( ) Delete
Name: WENTZ, DEBORAH
Address: 105 WINDSOR CRESENT STREET
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VP ( ) Delete
Name: BARTLETT, TIMOTHY
Address: 1012 QUINWOOD LANE
City-St-Zip: MAITLAND, FL 32751

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:

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: DEBORAH WENTZ T 03/31/2009

Electronic Signature of Signing Officer or Director — Date