

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V59920

FILED
Apr 26, 2009
Secretary of State

Entity Name: UNIPHAYS CORPORATION

Current Principal Place of Business:

77 SANDY HOOK
SARASOTA, FL 34242 US

New Principal Place of Business:

Current Mailing Address:

77 SANDY HOOK
SARASOTA, FL 34242 US

New Mailing Address:

FEI Number: 65-0385218 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICHARD L. SHRINER
77 SANDY HOOK ROAD NORTH
SARASOTA, FL 34278 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: PT () Delete
Name: SHRINER, RICHARD L
Address: 77 SANDY HOOK RD N
City-St-Zip: SARASOTA, FL

Title: VS () Delete
Name: SHRINER, LINDA J.
Address: 77 SANDY HOOK RD N
City-St-Zip: SARASOTA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SHRINER, RICHARD L
Address: 77 SANDY HOOK RD N
City-St-Zip: SARASOTA, FL

Title: VP (X) Change () Addition
Name: SHRINER, LINDA J.
Address: 77 SANDY HOOK RD N
City-St-Zip: SARASOTA, FL

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: RICHARD L. SHRINER

PRES

04/26/2009

Electronic Signature of Signing Officer or Director

_____ Date