

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001130

Entity Name: PSIGENICS CORPORATION

Current Principal Place of Business:

2153 SE HAWTHORNE ROAD, STE 217
GAINESVILLE, FL 32641

Current Mailing Address:

PO BOX 5039
GAINESVILLE, FL 32627

FEI Number: 20-2209813

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILBER, SCOTT A
2153 SE HAWTHORNE ROAD, STE 217
GAINESVILLE, FL 32641 US

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

Officer/Director Detail :

Title PD
Name WILBER, SCOTT A
Address 2153 SE HAWTHORNE ROAD, STE 217
City-State-Zip: GAINESVILLE FL 32641

Title D
Name TAYLOR, DEBORAH C
Address 2153 SE HAWTHORNE ROAD, STE 217
City-State-Zip: GAINESVILLE FL 32641

Title ST
Name TAYLOR, DEBORAH C
Address 2153 SE HAWTHORNE ROAD, STE 217
City-State-Zip: GAINESVILLE FL 32641

Title D
Name JASKOLSKI, COREY J
Address 2153 SE HAWTHORNE ROAD, STE 217
City-State-Zip: GAINESVILLE FL 32641

I hereby 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 all other like empowered.

SIGNATURE: MARNEY SCHULZ FOR SCOTT WILBER

**OFFICE MANAGER /
PRESIDENT**

01/14/2014

Electronic Signature of Signing Officer/Director Detail

Date