## 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0000000489

**Entity Name: XIOTECH CORPORATION** 

**Current Principal Place of Business:** 

9950 FEDERAL DRIVE SUITE 100

COLORADO SPRINGS, CO 80921-3686

**Current Mailing Address:** 

9950 FEDERAL DRIVE

SUITE 100

COLORADO SPRINGS, CO 80921-3686 US

FEI Number: 41-1821093 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

**FILED** Apr 15, 2015

**Secretary of State** 

CC3653225127

Officer/Director Detail:

**PRESIDENT** Title Title **SECRETARY** 

OWEN. BRIAN Name Name GUSTAVSSON, DAVID

Address 9950 FEDERAL DRIVE Address 9950 FEDERAL DRIVE

SUITE 100 SUITE 100

COLORADO SPRINGS CO 80921-COLORADO SPRINGS CO 80921-City-State-Zip: City-State-Zip:

Title **TREASURER** Title DIRECTOR

GOTTLIEB, CAROLE GLASSMEYER, EDWARD Name Name

9950 FEDERAL DRIVE 9950 FEDERAL DRIVE Address Address

> SUITE 100 SUITE 100

COLORADO SPRINGS CO 80921-City-State-Zip: COLORADO SPRINGS CO 80921-City-State-Zip:

> 3686 3686

Title **DIRECTOR** Title **DIRECTOR** Name BROSS, MATT Name BELETIC, JOHN

9950 FEDERAL DRIVE 9950 FEDERAL DRIVE Address Address

SUITE 100 SUITE 100

City-State-Zip: COLORADO SPRINGS CO 80921-City-State-Zip: COLORADO SPRINGS CO 80921-3686 3686

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.

04/15/2015 SIGNATURE: CAROLE GOTTLIEB **TREASURER**