

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006381

FILED  
Mar 28, 2008  
Secretary of State

Entity Name: RETRO-TECH SYSTEMS, INC.

**Current Principal Place of Business:**

2800 BERNICE ROAD, #17-A  
LANSING, IL 60438

**New Principal Place of Business:**

2800 BERNICE ROAD, #17-A  
SUITE 17A  
LANSING, IL 60438

**Current Mailing Address:**

2800 BERNICE ROAD, #17-A  
LANSING, IL 60438

**New Mailing Address:**

2800 BERNICE ROAD, #17-A  
SUITE 17A  
LANSING, IL 60438

FEI Number: 36-3912716

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KIRSCHT, STUART  
999 GENIUS DR.  
WINTER PARK, FL 32789 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: PSD ( ) Delete  
Name: MINKO, KURT  
Address: 7900 WEST 82ND COURT  
City-St-Zip: CROWN POINT, IN 46307

Title: VPD ( ) Delete  
Name: MAYNARD, GARY E  
Address: 9120 SCHILLTON DRIVE  
City-St-Zip: ST. JOHN, IN 46373

Title: VPD ( ) Delete  
Name: KIRSCHT, STUART  
Address: 999 GENIUS DR  
City-St-Zip: WINTER PARK, FL 32789

Title: VPD ( ) Delete  
Name: ROSHOLT, STEVE  
Address: 11737 N. 129TH WAY  
City-St-Zip: SCOTTSDALE, AZ 85259

**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: GARY MAYNARD

VPD

03/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date