

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L85116

FILED
Jan 05, 2010
Secretary of State

Entity Name: RAD SOURCE TECHNOLOGIES, INC.

Current Principal Place of Business:

6825 SHILOH RD EAST
SUITE B-2
ALPHARETTA, GA 30005

New Principal Place of Business:

480 BROGDON ROAD
SUITE 500
SUWANEE, GA 30024

Current Mailing Address:

6825 SHILOH RD EAST
SUITE B-2
ALPHARETTA, GA 30005

New Mailing Address:

480 BROGDON ROAD
SUITE 500
SUWANEE, GA 30024

FEI Number: 65-0882844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUKEN, THOMAS F
3081 E. COMMERCIAL BOULEVARD
SUITE 200
FORT LAUDERDALE, FL 33308 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: PD
Name: KIRK, RANDOL E
Address: 480 BROGDON ROAD, SUITE 500
City-St-Zip: SUWANEE, GA 30024

Title: D
Name: HARTMAN, WILLIAM M
Address: 480 BROGDON ROAD, SUITE 500
City-St-Zip: SUWANEE, GA 30024

Title: D
Name: MUNSON, ROBERT
Address: 480 BROGDON ROAD, SUITE 500
City-St-Zip: SUWANEE, GA 30024

Title: D
Name: KESALA, ADRIAN
Address: 480 BROGDON ROAD, SUITE 500
City-St-Zip: SUWANEE, GA 30024

Title: D
Name: ADAMS, RICHARD
Address: 480 BROGDON ROAD, SUITE 500
City-St-Zip: SUWANEE, GA 30024

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: WILLIAM HARTMAN

CFO

01/05/2010

Electronic Signature of Signing Officer or Director

_____ Date