

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000596

FILED
Apr 30, 2009
Secretary of State

Entity Name: INTREPID TECHNICAL SERVICES, INC.

Current Principal Place of Business:

5350 SHAWNEE RD
SUITE 250
ALEXANDRIA, VA 22312

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2698
ACTON, MA 01720

New Mailing Address:

FEI Number: 54-1753487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAZZORANA, DALE
14853 AVENIDA DE PALMA
WINTER GARDEN, FL 34787 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: P () Delete
Name: RIDENHOUR, STEVE
Address: 4005 SHARP PLACE
City-St-Zip: ALEXANDRIA, VA 22304

Title: CEOT () Delete
Name: DUSENBERRY, L. JILL
Address: 3526 MORNINGSIDE DR.
City-St-Zip: FAIRFAX, VA 22031

Title: COO () Delete
Name: DUSENBERRY, L. JILL
Address: 3526 MORNINGSIDE DR.
City-St-Zip: FAIRFAX, VA 22031

Title: V () Delete
Name: EVANS, MARTY
Address: 953 FAIRWAY CIRCLE
City-St-Zip: LAKE BARRINGTON, IL 60010

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: JILL DUSENBERRY

COO

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date