## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000096888

Entity Name: FLORIDA ICF SYSTEMS, INC.

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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4125 SW MARTIN HIGHWAY
STE. # 1A

11920 SW PARSON BROWN COURT
PALM CITY, FL 34990 US

PALM CITY, FL 34990 US

Current Mailing Address: New Mailing Address:

P.O.BOX 1936

PALM CITY, FL 34991 US

FEI Number: 65-1047049 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

GALLESE, WILLIAM F P.A. 2104 SE RAYS WAY STUART, FL 34994 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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: CIAGLO, DENNIS M Name: CIAGLO, DENNIS M

Address: 4125 SW MARTIN HIGHWAY, STE.#1A Address: 11920 SW PARSON BROWN COURT

City-St-Zip: PALM CITY, FL 34990 US City-St-Zip: PALM CITY, FL 34990 US

Title: STD () Delete Title: STD (X) Change () Addition
Name: CULVERHOUSE, KATHERINE M
Address: 4125 SW MARTIN HIGHWAY, STE.#1A

Title: STD (X) Change () Addition
Name: CULVERHOUSE, KATHERINE M
Address: 11920 SW PARSON BROWN COURT

City-St-Zip: PALM CITY, FL 34990 US City-St-Zip: PALM CITY, FL 34990 US

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: KATHERINE M CULVERHOUSE STD 04/29/2008