## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000092936

Entity Name: FDC PROPERTY SOLUTIONS, INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

304 10TH AVENUE EAST 604 SOUTH PINELLAS AVENUE PALMETTO, FL 34221 TARPON SPRINGS, FL 34689

Current Mailing Address: New Mailing Address:

P. O. BOX 151 PALMETTO, FL 34220

FEI Number: 20-5209099 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TSCHIDA, DENISE L

A TO Z DISCOUNT LIQUORS & MORE
304 10TH AVENUE EAST

PALMETTO, FL 34221 US

A TO Z DISCOUNT LIQUORS & MORE
604 SOUTH PINELLAS AVENUE
TARPON SPRINGS, FL 34689 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: DENISE TSCHIDA 04/30/2009

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: TSCHIDA, DENISE L TSCHIDA, DENISE L

 Name:
 TSCHIDA, DENISE L
 Name:
 TSCHIDA, DENISE L

 Address:
 304 10TH AVENUE EAST
 Address:
 604 SOUTH PINELLAS AVENUE

 City-St-Zip:
 PALMETTO, FL 34221
 City-St-Zip:
 TARPON SPRINGS, FL 34689

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

Name: TSCHIDA, FRANK J Name: TSCHIDA, FRANK J

Address: 304 10TH AVENUE EAST Address: 604 SOUTH PINELLAS AVENUE City-St-Zip: PALMETTO, FL 34221 City-St-Zip: TARPON SPRINGS, FL 34689

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: DENISE TSCHIDA PD 04/30/2009