2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000043333

Entity Name: HERNANDO COUNTY INFORMATION SERVICES, INC.

FILED Feb 09, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
7321 SUNSHINE GROVE ROAD BROOKSVILLE, FL 34613			
Current Mailing Address:		New Mailing Address:	
7321 SUNSHINE GROVE ROAD BROOKSVILLE, FL 34613			
FEI Number: 26-2529978	FEI Number Applied For () FEI Num	nber Not Appli	icable () Certificate of Status Desired (X)
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
CARR, EDWARD 7321 SUNSHINE GROVE ROAD BROOKSVILLE, FL 34613 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:			
	ronic Signature of Registered Agent cing Trust Fund Contribution ().		Date
OFFICERS AND DIRECTORS: ADDIT		ADDITION	S/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	PRES () Change (X) Addition GARMAN, PEGGY 23080 DEWITT DRIVE BROOKSVILLE, FL 34601
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	VCHR () Change (X) Addition WEAVER, MARGARET 3391 EAGLE NEST DRIVE HERNANDO BEACH, FL 34607
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	SEC () Change (X) Addition HIRST, EDWARD 22106 GARMISCH WAY BROOKSVILLE, FL 34601
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	TRES () Change (X) Addition NEIMAN, LAURIE 2166 MARINER BLVD. SPRING HILL, FL 34609
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIRC () Change (X) Addition ROITHMEIER, JULIE 14456 LINDEN DRIVE SPRING HILL, FL 34609
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIRC () Change (X) Addition SIMON, DEBRA 10495 CALICO WARBLER AVENUE BROOKSVILLE, FL 34613

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: PEGGY GARMAN PRES 02/09/2009