

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000067934

FILED  
Feb 05, 2008  
Secretary of State

Entity Name: COPYCO, INC.

**Current Principal Place of Business:**

6401 NOB HILL ROAD  
TAMARAC, FL 33321 US

**New Principal Place of Business:**

**Current Mailing Address:**

6401 NOB HILL ROAD  
TAMARAC, FL 33321 US

**New Mailing Address:**

FEI Number: 65-0605399      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 ( ) Delete  
Name: COLSTON, BRENT  
Address: 6401 NOB HILL ROAD  
City-St-Zip: TAMARAC, FL 33321

Title: VT ( ) Delete  
Name: HOLLAND, BRIAN  
Address: 6401 NOB HILL ROAD  
City-St-Zip: TAMARAC, FL 33321

Title: VPS ( ) Delete  
Name: MORAN, STEPHEN  
Address: 6401 NOB HILL ROAD  
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete  
Name: TAYLOR, RICK  
Address: 6401 NOB HILL ROAD  
City-St-Zip: TAMARAC, FL 33321

Title: VCFO (X) Delete  
Name: ALLEN, DESMOND  
Address: 6401 NOB HILL ROAD  
City-St-Zip: TAMARAC, FL 33321

**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: VCFO (X) Change ( ) Addition  
Name: MATHEWS, MARK  
Address: 6401 NOB HILL ROAD  
City-St-Zip: TAMARAC, FL 33321

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: BRIAN HOLLAND

VT

02/05/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date