

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000005273

FILED
Apr 06, 2009
Secretary of State

Entity Name: SHAKER COMPUTER AND MANAGEMENT SERVICES, INC.

Current Principal Place of Business:

6 AIRPORT PARK BOULEVARD
LATHAM, NY 12110

New Principal Place of Business:

Current Mailing Address:

6 AIRPORT PARK BOULEVARD
LATHAM, NY 12110

New Mailing Address:

FEI Number: 14-1583023

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: CD () Delete
Name: WERNER, RICHARD
Address: 1535 LEXINGTON PKWY
City-St-Zip: SCHENECTADY, NY 12309

Title: D () Delete
Name: SULLIVAN, LARRY
Address: 6 AIRPORT PARK BLVD.
City-St-Zip: LATHAM, NY 12110

Title: T () Delete
Name: MCGOWAN, PATRICK
Address: 669 STARK TERRACE
City-St-Zip: BALLSTON SPA, NY 12020

Title: D () Delete
Name: LEAVER, DEREK
Address: 6 AIRPORT PARK BLVD
City-St-Zip: LATHAM, NY 12110

Title: SD (X) Delete
Name: DIEDRICH, ALAN
Address: 620 SALVIA LANE
City-St-Zip: SCHENECTADY, NY 12303

Title: D (X) Delete
Name: CURRO, STEPHEN
Address: 935 RIVERVIEW RD
City-St-Zip: NISKAYUNA, NY 12309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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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: PATRICK J. MCGOWAN

CFO

04/06/2009

Electronic Signature of Signing Officer or Director

Date