

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140523

FILED  
Jun 14, 2009  
Secretary of State

Entity Name: 24/7 MANAGEMENT SERVICES INC.

## Current Principal Place of Business:

9 INDIAN SPRINGS DR  
ORMOND BEACH, FL 32174

## New Principal Place of Business:

39 INDIAN SPRINGS DR  
ORMOND BEACH, FL 32174

## Current Mailing Address:

9 INDIAN SPRINGS DR  
ORMOND BEACH, FL 32174

## New Mailing Address:

39 INDIAN SPRINGS DR  
ORMOND BEACH, FL 32174

FEI Number: 37-1479984

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEDERSEN, MICKY  
9 INDIAN SPRINGS DRIVE  
ORMOND BEACH, FL 32174 US

## Name and Address of New Registered Agent:

PEDERSEN, MICKY  
39 INDIAN SPRINGS DRIVE  
ORMOND BEACH, FL 32174 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: MICKY PEDERSEN

06/14/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: PEDERSEN, MICKY  
Address: 17 GREENVALE DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: PEDERSEN, MICKY  
Address: 139 INDIAN SPRINGS DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

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: MICKY PEDERSEN

PRES

06/14/2009

Electronic Signature of Signing Officer or Director

Date